

CAL Release: 1.05

CAL Document: 1.05.02

California File .CAL Layouts  
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CONTENTS

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	page
Overview . . . . .	2
Section 1 - Campaign Disclosure Reports . . . . .	15
Section 2 - Campaign Statements (Org, Term, etc.) . . . .	45
Section 3 - Lobbyist Disclosure Reports . . . . .	51
Section 4 - Lobbyist Statements (Org, Term, etc.) . . . .	66

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\* O V E R V I E W \*  
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In accordance with the requirements of SB 49, the Secretary of State (SOS) is required to define standardized record format or formats for transmission by the filing community of data required to be filed electronically under SB 49. The SOS will accept test files from vendors to ensure compliance and compatibility with these formats, and publish a list of the certified vendors or other parties who have successfully filed test reports with us.

This document contains the design definition of the California Electronic Filing Format for the electronic filing of California Campaign and Lobbyist Documents. This format defines the order and contents of the electronic filing data files that will be accepted and processed by the State of California's Candidate and Lobbyist Automated Information Management System (CLAIMS). This filing format has been developed to meet the specific requirements of SB 49 to implement electronic filing of these documents and to disclose this data to the public over the Internet. The specific layout of the format is derived from the data requirements of the forms themselves and experience gained implementing similar systems in other venues.

This filing format is being used as the basis for the design of the CLAIMS system and will be used to receive filings from filing software that use the ".CAL" format. Like all software development integration efforts of this type, it is anticipated that minor problems will be found with the format. Please submit problem reports related to any potential problems to [dhulse@ss.ca.gov](mailto:dhulse@ss.ca.gov)

The filing format is in the public domain and is non-proprietary. There are no intellectual property limitations associated with the filing format. The format is administered by the SOS and all changes or corrections to the format will be managed by the SOS.

Proposed filing formats are provided for the following forms:

CAMPAIGN

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400	Statement of Organization (Slate Mailer Organization)
401	Slate Mailer Organization Campaign Statement
402	Statement of Termination (Slate Mailer Organization)
405	Amendment to Campaign Disclosure Statement
410	Statement of Organization Recipient Committee
425	Semi-Annual Statement of no Activity

450 Recipient Committee Campaign Disclosure Statement - Short Form  
460 Recipient Committee Campaign Statement (including Form 460 A-1)  
461 Independent Expenditure Cmtte & Major Donor Cmtte Campaign Statement  
465 Supplemental Independent Expenditure Report  
470 Officeholder and Candidate Campaign Statement - Short Form  
495 Supplemental Pre-Election Campaign Statement  
496 Late Independent Expenditure Report  
497 Late Contribution Report  
498 Slate Mailer Late Payment Report

Although the Form 460 A-1 is a separate stand-alone form, this form is always used as an attachment to the Form 460. Consequently, for electronic filing purposes, this form (or schedule) will be attached to the Form 460 cover page.

#### LOBBYIST

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601	Lobbying Firm Registration Statement
602	Lobbying Firm Activity Authorization
603	Lobbyist Employer or Lobbying Coalition Registration Statement
604	Lobbyist Certification Statement
605	Amendment to Registration, Lobbying Firm, Lobbyist Employer, Lobbying Coalition
606	Notice of Termination
607	Notice of Withdrawal
615	Lobbyist Report
625	Report of Lobbying Firm
630	Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)
635	Report of Lobbyist Employer or Report of Lobbying Coalition
635-C	Payments Received by Lobbying Coalitions
640	Governmental Agencies Reporting (Attachment to Form 635 or Form 645)
645	Report of Person Spending \$5,000 or More
690	Amendment to Lobbying Disclosure Report

The first record in a CAL file must be a short CSV (comma-separated-value) record identified with the text "HDR" in the first field and "CAL" in the second field. The rest of the fields contain information such as version numbers and software identification for the filing database program which created the electronic CAL filing. The layout of a HDR record is described on the next page.

The filing database program is responsible for creating the various record types described in this document. It will assemble them into a single (.CAL) file with a HDR record, immediately followed by a CVR (Cover) record, followed by a number of other record types (e.g. CVR2, CVR3, SMRY, RCPT, EXPN,...) as required by a particular type of filing. The specific record types that are should be included after the HDR and CVR records of each type of filing (e.g. F460 F615, F625, F635, ...) are listed at the beginning of each of the four Filing Sections later in this document.

Note: The following layouts use 'Rx', 'R', 'Cx' & 'C' to indicate if a field is (R)equired or (C)onditionally required. If required {or conditionally required} and data is missing, the 'x' indicates whether this results in a filing being "Rejected" by the agency.

'Rx' = (R)equired field; SOS "Rejects" filing (Level-8)  
'R' = (R)equired field, but SOS "Accepts" filing (Level-4)  
'Cx' = (C)ond Required field; SOS "Rejects" filing (Level-8)  
'C' = (C)ond Required field, but SOS "Accepts" filing (Level-4)

'O' = (O)ptional field. Code is used within this document so that programs which 'read' this document can use a simple and consistent approach for parsing the text.

Header Record Layout (common to all CAL filing types)  
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	R{x}		Max	
#	C{x}	Field Name	Len	Description
-----	-----	----	----	-----
01	Rx	Rec_Type	3	Record Type. Value: HDR
02	Rx	EF_Type	3	Electronic Filing Type (a.k.a. Form_Type) Value: CAL
03	Rx	State_Cd	2	State Code. Value: CA
04	Rx	CAL_Ver	4	CAL Version #. Value: 1.05
05	Rx	Soft_Name	90	Filer Software Name
06	Rx	Soft_Ver	16	Filer Software Version #
07	O	HDRcomment	200	Optional comment (only used for development/testing)

NOTES ABOUT CERTAIN FIELD TYPES

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E.F (.CAL) files are not case sensitive. Rec\_Type, Form\_Type and all "code" fields (e.g. Entity\_Cd, Yes/No fields, Check-box fields), can have values represented in any mix of UPPERCASE or lowercase letters." It is important that software that generates "CAL" files prevent any fields from containing "leading spaces" (e.g. " Text information" has a leading space before the word Text). Fields with leading spaces are not allowed.

Each kind of record must be coded with the exact number of field delimiters necessary to define the number of fields as specified by this document. The number of fields required on CVR and CVR2 records depends on the Form\_Type. All other records have field counts which vary with the value of Rec\_Type.

DATES

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All date fields must be in CCYYMMDD format. Dates are always coded as 8-digit fields in Century, Year, Month, & Day order.

AMOUNTS

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Monetary amounts are stored with an "explicit" decimal point, which when coded, must be followed by 1 or 2 (but no more than 2) decimal positions. Embedded commas are not allowed and cause a filing to be rejected. Negative amounts can be represented with a leading hyphen (-) character.

Examples:

123.45	- represents an amount of \$123.45
345	- represents an amount of \$345.00
-567.8	- represents a negative amount of \$567.80
\$1,234.00	- invalid & will be rejected (commas & other symbols not allowed)
1234.00-	- invalid & will be rejected (no trailing '-' signs allowed)

RATES & PERCENTS

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Rates & Percents are expressed as "freeform" text. When a Loan or Investment is expressed in terms of a "rate", the value should be represented with an explicit decimal point (e.g. 0.056). If the same "rate" is expressed as a percentage, the % symbol should be used. A rate of 0.056 would be expressed as 5.6%. There are times when rates are variable and expressed as "prime + 1%" or perhaps "15% + applicable T-bill". Percents/Rates are carried in "CAL" files in fields of up to 30-characters.

## NAMES

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Names are carried in 4 explicitly defined fields:

- 1) Last Name is a 200 character field which is used for a person's last name or is used for the complete name of a non-person entity such as a committee, business, ballot measurer name, etc.
- 2) First name is a 45 character field which is used to store a person's first name and any middle name(s) and/or initials. For a person, it's all the names excepting the Last Name or surname.

A Moniker may be included in the First name field. It can be identified with surrounding single-quote (') characters. It must not be surrounded with double-quote (") characters, because embedded double-quotes (") are not allowed within text fields in the CAL format. When displayed or printed in CLAIMS, the single-quote characters are shown as double-quotes.

- 3) Title (or prefix) is used for titles used by a person such as Mr, Mrs, Ms, Hon, Rep, Sen, Dr, and so on. Up to 10 characters are allowed.
- 4) Suffix is used for a person's suffix such as Jr, Sr, II, III, Esquire, etc. As many as 10 characters are allowed.

## ADDRESSES

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Addresses must contain a postal "delivery line" (such as a street address or a PO box), plus city, state code and a 5-digit (or optionally a Zip+4) ZIP Code. In other words, a complete "mailing address" should be given as an "address".

"CAL" records allow for 2 lines of address (in addition to the fields for city, state code and ZIP Code). When only one line of street address is given, it should be a postal delivery line and should be coded in the Address1 field (Address2 field should be blank). When two lines of address are given, the postal delivery line should be coded in Address2 (Address1 will contain "non-delivery" information such as a building name, "attention:", etc.).



## Zip Codes & Zip +4

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Zip Codes are defined as a maximum of 10 characters. Zip Codes can be stored as 5-digit, 9-digit, or as 5-digit/hyphen/4-digit values.

#### PHONE NUMBERS

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Phone numbers are coded "freeform" in a 20-character Phone field. Any special instructions (e.g. select #3 from the menu) and/or extension numbers should be included in Phone number fields.

#### YES/NO BOX PAIRS

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Yes/No Boxes are represented on Forms and Schedules as two separate boxes. They are mutually exclusive in their use, however if a filer checks both boxes in a Yes/No group, this should be interpreted the same as if neither box is checked. The results are stored in a single field in the Electronic File - the only acceptable values in a Yes/No field are blank, "Y" and "N".

#### SINGLE CHECK-BOXES

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Check-box fields differ from Yes/NO Boxes. Check-boxes reflect either a "positive" response (i.e. the filer has put a check-mark, an "X" or some other kind of marking in the Box), or "no response". The lack of a mark in a Check-box means only that a "positive" response HAS NOT been made. It does not indicate a "negative" response - the filer might have ignored the Check-box on the form.

In electronic filing, Check-box fields are coded with an "X" to indicate that the item on the form was "checked". Nothing is coded when the item was not "checked".

#### CHECK-BOXES GROUPS

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Forms often have groups of Check-boxes where only one box can be checked. These are called "mutually exclusive" Check-box groups. The convention used in "CAL" files is to define a single field to represent a group

of mutually-exclusive Check-boxes on a paper form. Code values are defined to represent each possible selection (e.g. [1|2|3|...] or [A|B|C|...]).

Note: The convention in MS Windows is to offer mutually exclusive choices with what are called "radio buttons".

Note: The convention in "CAL" is to define a separate field for each check-box which is not part of a mutually exclusive group.  
(see Single Check-boxes above).

ENTITY CODES USED ON FORMS & SCHEDULES

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The following Entity Codes are used to indicate various kinds of persons and committees on "Cover Page" (CVR) record types:

CAO - Candidate/Office-holder	(F460, F465, F470, F496, F497)
CTL - Controlled Committee	(F460, F465, F496, F497)
RCP - Recipient Committee	(F425, F450, F460, F465, F496, F497)
SMO - Slate Mailer Organization	(F401, F498)
BMC - Ballot Measure Committee	(F450, F460, F465, F496, F497)
MDI - Major Donor/Ind Expenditure	(F461, F465, F496, F497)
LBY - Lobbyist (an individual)	(F606, F607, F615, F645)
FRM - Lobbying Firm	(F601, F602, F603, F625, F645)
LEM - Lobbying Employer	(F601, F602, F603, F635, F645)
LCO - Lobbying Coalition	(F601, F602, F603, F635, F645)
IND - Person (spending > \$5000)	(F645)

The following "Entity Codes" are used to indicate various kinds of persons on "Additional Name/Address" CVR2 record types:

ATR - Assistant Treasurer	(F410, F425, F450, F460)
POF - Principal Officer	(F400, F410, F465)
OFF - Officer	(F465-Part5, F625, F635)
CAO - Cand/Officeholder	(F410, F460-Part4a, F460-Part5b, F460-Part6, F465)
PRO - Proponent	(F410, F460-Part5b)
SPO - Sponsor	(F410)
BNM - Ballot Measure's Name/Title	(F410, F460-Part5a)
ATH - Authorizing Individual	(F400)
COM - Committee	(F400, F460-Part4b, F470-Part4)
CTL - Controlled Committee	(F410, F460-Part4b, F470-Part4)
RCP - Recipient Committee	(F400, F460-Part4b, F470-Part4)
PTN - Partner	(F625, F635)
OWN - Owner	(F625, F635)
EMP - Employer	(F625, F635, F603)
FRM - Lobbying Firm	(F603)
AGY - State Agency	(F603)
SCL - Subcontracted Client	(F602)
MBR - Member of Association	(F602)

Note: F460 Part4a/Part4b & Part5a/Part5b refer to the "upper"/"lower" portions of Parts 4 and 5 located on the 460's second cover page.

The following CVR2 "Item Codes" indicate which Section within F400 & F410 reports the Entity is to be listed:

- ATR - (Item\_Cd) Assistant Treasurer (F410)
- POF - (Item\_Cd) Principal Officer (F400, F410)
- CTL - (Item\_Cd) Controlled Committee (F410)
- PFC - (Item\_Cd) Primarily Formed Committee Item (F410)
- SPO - (Item\_Cd) Sponsored Committee Itemization (F410)
- SMA - (Item\_Cd) Slate Mailer Authorizer (F400)

ENTITY CODES USED ON FORMS & SCHEDULES (continued)

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The following Entity Codes are used to indicate various kinds of persons on "verification" CVR3 record types:

TRE - Treasurer  
CAO - Candidate/Office Holder  
OFF - Officer (Responsible)  
PRO - Proponent  
SPO - Sponsor

The following Entity Codes are used to indicate various kinds of persons and organizations on various schedules including RCPT, EXPN, and LOAN record types:

COM - Recipient Committee  
RCP - Recipient Committee  
IND - Individual  
OTH - Other

LOBBYING ACTIVITY DESCRIPTION (Lby\_Actvty on Lobbyist CVR & LPAY records)

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If additional space is needed to describe this activity, attach a text memo record describing the activity to the filing. When reporting lobbying activity, the preferred format to identify bills is the type of bill followed by the bill number. Each bill is separated by a space character or comma. Putting a white space between the bill type and bill number is optional. Formatting the information in this manner provides the public with better access to bill information. The following variations comply with this definition.

AB26 AB30, SB300, SB 285 AB 325,SB203, AB 25

The codes recognized by the system are AB, AC, ACA, ACR, AJR, HR, SB, SCA, SCR, SJR, and SR. In addition, any of these codes followed by an X and a single digit (for example ABx7 or ABx 7) will be recognized.

OFFICE CODES USED ON FORMS & SCHEDULES

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Statewide Offices

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GOV - Governor  
LTG - Lieutenant Governor  
SOS - Secretary of State  
CON - State Controller  
ATT - Attorney General  
TRE - State Treasurer  
INS - Insurance Commissioner  
SUP - Superintendent of Public Instruction

State District Offices

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SEN - State Senator  
ASM - State Assembly Person  
BOE - Board of Equalization Member

City, County and Local Offices

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ASR - Assessor  
BED - Board of Education  
BSU - Board of Supervisors  
CAT - City Attorney  
CCB - Community College Board  
CCM - City Council Member  
COU - County Counsel  
CSU - County Supervisor  
CTR - Local Controller  
DAT - District Attorney  
MAY - Mayor  
PDR - Public Defender  
PLN - Planning Commissioner  
SHC - Sheriff-Coroner  
SCJ - Superior Court Judge  
TRS - Local Treasurer

Miscellaneous / Other

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OTH - Other



EXPENSE CODES USED ON 460 EXPENSE SCHEDULES

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These 3-character codes have been described by the FPPC for use on F460 / Schedules E, F and G. CLAIMS uses these codes universally on other forms & schedules when Expense Amounts require categorization.  
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CMP - campaign paraphernalia/miscellaneous  
CNS - campaign consultants  
CTB - contribution (if nonmonetary, explain)\*  
CVC - civic donations  
FND - fundraising events  
IND - independent expenditure supporting/opposing others (explain)\*  
LIT - campaign literature and mailings  
MTG - meetings and appearances  
OFC - office expenses  
PET - petition circulating  
PHO - phone banks  
POL - polling and survey research  
POS - postage, delivery and messenger services  
PRO - professional services (legal, accounting)  
PRT - print ads  
RAD - radio airtime and production costs  
RFD - returned contributions  
SAL - campaign workers salaries  
TEL - T.V. or cable airtime and production costs  
TRC - candidate travel, lodging and meals (explain)  
TRS - staff/spouse travel, lodging and meals (explain)  
TSF - transfer between committees of the same candidate/sponsor  
VOT - voter registration  
WEB - information technology costs (internet, e-mail)

\* Note: IND & CTB (if nonmonetary) require explanations, and must be listed on Schedule D. TRC & TRS require explanations.

CLAIMS Expense Codes which are not explicitly listed on FPPC forms.  
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MON - Monetary contribution - this code means that the contribution is specifically a monetary contribution. It is not an allowable value for Schedules E, F & G on F460 filings. It can be coded as a value

on Schedule D, and on the F450P5, F461P5 and F465P3 schedules.

IKD - Non-monetary contribution - this code means that the contribution is specifically a non-monetary contribution. It is not an allowable value for Schedules E, F & G on F460 filings. It can be coded as a value on Schedule D, and on the F450P5, F461P5 and F465P3 schedules.

LON - Loan - This is a "generic" code meaning that a F461P5 contribution is a Loan. Other Codes used on F461P5 are 'MON', 'CTB' & 'IND'.

AMENDMENT PROCESSING OF ITEMS IN SCHEDULES

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Tran\_ID: A unique identifier permanently associated with each itemization or transaction appearing in a CAL electronic file. If a given itemization appears in more than one schedule (e.g. a forgiven loan is reported on both Schedule A and Schedule B) then the Tran\_ID associated with that itemization can either have the same value or different values for that single item among the various schedules. However, all Tran\_IDs of itemizations appearing in any amending report must match the Tran\_IDs first used for those same itemizations in the original report.

The Tran\_ID assigned and maintained by the filer's software is used by the California SOS's database to uniquely identify each itemization from every schedule and from every filer. It is critically important that when a filer amends a previously filed electronic report, the Tran\_IDs of the subsequent amendment match those already reported. It is acceptable for a Tran\_ID of one original report to be assigned a value that was used on a previous original report. Tran\_IDs must be unique WITHIN a report group - that is an original report and all of it's amendments.

Although software will assign a Tran\_ID to a dollar itemization on almost all schedules, this is not so with the 460's Schedule F. "Schedule" F is a series of summarizations - the main entries are summarizations for a payee/creditor. Therefore Tran\_IDs on Schedule F will be unique identifiers used for the payee/creditor entity. Sub-itemizations on Schedule F that show new incurred expenses for the reporting period will, however, be assigned Tran\_IDs for the individual incurred expense items.

A unique Tran\_ID must also be assigned to each CVR2 and CVR3 record. Since these are not "money" records, the Tran\_ID will be a unique identifier that is assigned to the Entity who/which is coded in each CVR2 and CVR3 record.

MEMOS NOTES & EXPLANATORY TEXT

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Large bodies of text can be associated with forms and also with individual itemizations within schedules. A special TEXT record can be used in a CAL file to carry descriptive text as a string of characters not exceeding 4000 characters.

TEXT records can be associated with a filing's "cover" page, with a schedule as a whole, and to one or more individual itemizations within a schedule.

The contents of TEXT records are printed on "pages" following the form(s) to which they are related. For example, a body of TEXT related to a cover form will be shown following that form. Likewise, TEXT related to a schedule (as a whole and/or itemizations within that schedule) are printed on pages after the last detailed itemization of the particular schedule. Depending on the amount of "white space" available on a form, the print rendering software in CLAIMS will attempt to "fit" short text memos within the immediate proximity of the item to which the memo is attached, otherwise it is printed on separate "pages".

CAL layouts for Schedules include a field named Memo\_RefNo. This is a value assigned by the filer and is printed within the itemization area of the printed schedule as a "reference" to the memo text that is printed after the last detailed itemization in the schedule. Memo\_RefNo can be thought of as being like a footnote reference.

The layout of the TEXT record is described below:

R{x}		Max	
#	C{x} Field Name	Len	Description
-----		---	-----
01 Rx	Rec_Type	4	Record Type Value: TEXT
02 Rx	Form_Type	8	Contains 'Form_Type' of a "cover" Form (F4**, F6**) or a Schedule (e.g. A,B1,C,E, ...) to which this text/memo/note is related. Values: (F4**, F6**, any schedule name)
03 O	Ref_No	20	The value contained in a schedule itemization's 'Memo_RefNo' field.
04 R	Text4000	4000	A string of unformatted text up to 4000 characters. (note: no tab, carriage return, line feed or any

other non-printable characters may be embedded  
within the string of text.)

Examples:

TEXT,F460,, "Some general notes about this 460 filing are given here."

TEXT,A,, "Some general notes about Schedule A in this 460 filing."

TEXT,C,123, "A long memo for an item in Schedule C that references Memo 123."

BACK-REFRENCING TO RELATE "CHILD" SUBITEMIZATIONS BACK TO "PARENT" ITEMIZATIONS

Schedules that can have child records have a new BakRef\_TID field are:

Disclosure Report	Report/Schedule	Rec Type
401 Slate Mailer Camp Stmt:	401/B	S401
460 Campaign Statement:	460/A; 460/C	RCPT
460 Campaign Statement:	460/E; 460/G	EXPN
460 Campaign Statement:	460/B1; 460/B2	LOAN
460 Campaign Statement:	460/F	DEBT
Lobbyist Activity Expenses:	615/P1; 625/P3-A; 635/P3-C; 645/P2	LEXP
Lobbyist Payments Received:	625/P2	LPAY
Lobbyist Payments Made:	635/P3-B	LPAY
Lobbyist Pol Contribs Made:	615/P2; 625/P4-B; 635/P4-B; 645/P3-B	LCCM

The BakRef\_TID of a "sub-itemization" (a "child" record in programmer talk) is used to "refer back" to the main itemization record in a schedule. A sub-itemization (like a "memo" record where Memo\_Code=X) does not count toward any schedule or summary page dollar totals. It is an informational record.

A non-blank BakRef\_TID both indicates that a record is a "child" record, and also points (refers back) to the main itemization or "parent" record. The value that is coded into the BakRef\_TID of a child record is that of the Tran\_ID belonging to the parent record.

The CLAIMS system maintains references so that entities listed in "sub-itemizations" can be located in queries of the CLAIMS database.

The 460 Schedule G is a special case where ALL entires on that form are really sub-itemizations for items that appear on the 460's Schedule E or Schedule F. Filers have the option of coding Schedule E/F sub-itemizations within Schedules E/F themselves, or separately on Schedule G. CLAIMS will maintain referneces from child records on Schedule G back to the parent records on Schedule E/F by using Schedule G's BakRef\_TIDs (which are required on Sched G). A field called G\_From\_E\_F on the EXPN layout is used for Schedule G "child" records to indicate whether the "parent" record is found on Schedule E or Schedule F.

Programmers should note that "parent" records on the F460's Schedule F are assigned Tran\_IDs that are unique for the Payee/Creditor or are unique for the "debt". However, "child" sub-itemizations of new incurred expenses and new

payments are assigned Tran\_ID's unique to the incurred item. The values in BakRef\_TID's in Schedule F need to take this into account.

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S e c t i o n 1 - C a m p a i g n D i s c l o s u r e R e p o r t s  
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401 Slate Mailer Organization Campaign Statement  
405\* Amendment to Campaign Disclosure Statement  
425 Semi-Annual Statement of no Activity  
450 Recipient Committee Campaign Disclosure Statement - Short Form  
460 Recipient Committee Campaign Statement  
461 Independent Expenditure Committee and Major Donor Committee  
Campaign Statement  
465 Supplemental Independent Expenditure Report  
470 Officeholder and Candidate Campaign Statement - Short Form  
495\* Supplemental Pre-Election Campaign Statement  
496 Late Independent Expenditure Report  
497 Late Contribution Report  
498 Slate Mailer Late Payment Report

\* The 405 and 495 forms are not filed as stand-alone filings.  
Instead they are included within F450 and F461 filings.

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Electronic File Components by Filing Type

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RecType	FormName	Description
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HDR	CAL	"CAL" Header record
CVR	F401	Cover Page; Slate Mailer Organization
CVR3	F401	Cover Page; Part IV; Verification Information
SMRY	F401...	Summary Page & Misc. Schedule Line-item [sub]totals
RCPT	F401A	Payments Received
S401	F401B	Payments Made
S401	F401B-1	Payments Made by Agent/Contractor on Behalf of SMO
S401	F401C	"F400" Persons in SMO Receiving \$1000 or more
S401	F401D	Candidates/Measurers not on Schedule F401A
HDR	CAL	"CAL" Header record
CVR	F425	Cover Page; Semi Annual Statement of No Activity
CVR2	F425	Cover Page; Part 1; Assistant Treasurer
CVR3	F425	Cover Page; Part 3; Verification Information
HDR	CAL	"CAL" Header record
CVR	F450	Cover Page; Recipient Committee
CVR2	F450	Cover Page; Part 3; Assistant Treasurer
CVR3	F450	Cover Page; Verification Information
F405	F450	Amendment Information sheet (a.k.a. Form 405)
F495	F450	Supplemental Pre-Election Statement (a.k.a. Form 495)
SMRY	F450...	Summary Page & Misc. Schedule Line-item [sub]totals
EXPN	F450P5	Expenditures & Contributions Made
HDR	CAL	"CAL" Header record
CVR	F460	Cover Page; Candidate Committee
CVR2	F460	Cover Page; Additional Committees, Asst Treas, etc.
CVR3	F460	Cover Page; Part 7; Verification Information
F405	F460	Amendment Information sheet (a.k.a. Form 405)
F495	F460	Supplemental Pre-Election Statement (a.k.a. Form 495)
SMRY	F460...	Summary Page & Misc. Schedule Line-item [sub]totals
RCPT	A	Schedule A Contributions
RCPT	A-1	Schedule A-1 Contribs Trans to Spec Election Cmtte
RCPT	C	Schedule C Non-Monetary Contributions
RCPT	I	Schedule I Miscellaneous
EXPN	D	Schedule D Summary of Expenditures - Support/Oppose ...

EXPN	E	Expenditures
EXPN	G	Expenditures "on behalf" of another Committee
DEBT	F	Accrued Expenses (Unpaid Bills)
LOAN	B1	Loan Received
LOAN	B2	Loan - Repayment Made
LOAN	B3	Loan - Unpaid Balance
LOAN	H1	Loan Made
LOAN	H2	Loan - Repayment Received
LOAN	H3	Loan - Unpaid Balance

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F461	Cover Page; Ind Expenditure & Major Donor Committee
CVR3	F461	Cover Page; Part 4; Verification Information
F405	F461	Amendment Information sheet (a.k.a. Form 405)
SMRY	F461...	Summary Page & Misc. Schedule Line-item [sub]totals
EXPN	F461P5	Expenditures & Contributions Made
HDR	CAL	"CAL" Header record
CVR	F465	Cover Page; Supplemental Independent Expenditure Rpt
CVR2	F465	Cover Page; Part V Filing Officer Titles & Addresses
CVR3	F465	Cover Page; Part VII; Verification Information
SMRY	F465...	Summary Page & Misc. Schedule Line-item [sub]totals
EXPN	F465P3	Independent Expenditures Made
HDR	CAL	"CAL" Header record
CVR	F470	Cover Page; Officeholder/Cand Short Form & Supplement
CVR2	F470	Cover Page; Part IV; Committee Names & Addresses
CVR3	F470	Cover Page; Part V; Verification Information
HDR	CAL	"CAL" Header record
CVR	F496	Cover Page; Late Independent Expenditure Report
S496	F496	Independent Expenditures Made
HDR	CAL	"CAL" Header record
CVR	F497	Cover Page; Late Contribution Report
S497	F497P1	Late Contributions Received
S497	F497P2	Late Contributions Made
HDR	CAL	"CAL" Header record
CVR	F498	Cover Page; Slate Mailer Late Payments Report
S498	F498-R	Late Payments Received From:
S498	F498-A	Late Payments Attributed To:

COVER PAGE RECORD LAYOUT FOR F401, F450, F460, F461 DISCLOSURE REPORTS  
F425 STATEMENT OF NO ACTIVITY  
F465 SUPPLEMENTAL INDEPENDENT EXPENDITURE  
F496, F497, F498 LATE CONTRIB/EXPEND REPORTS

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R{x}	# C{x}	Field Name	Max Len	Description
-----	----	-----	----	-----
01 Rx		Rec_Type	3	Record Type Value: CVR
02 Rx		Form_Type	4	Type of Filing or Form set. Values: F401; F425; F450; F460; F461; F465; F496; F497; F498
03 Rx		Filer_ID	9	Committee ID number of Filer
04 O		Entity_Cd	3	Values: CAO - Candidate/Office-holder (F460,465,496,497) CTL - Controlled Committee (F460,465,496,497) RCP - Recipient Committee (F460,425,450,465,496,497) SMO - Slate Mailer Organization (F401,498) BMC - Ballot Measure Committee (F460,450,465,496,497) MDI - Major Donor/Ind Expenditure (F461,465,496,497)
05 Rx		Filer_NamL	200	Filer's Last name
06 C		Filer_NamF	45	Filer's First name(s) (Required for persons)
07 O		Filer_NamT	10	Filer's Prefix or Title
08 O		Filer_NamS	10	Filer's Suffix
09 Rx		Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999
10 Rx		Rpt_Date	8	Date this report is filed
11 Cx		Stmt_Type	2	Type of Statement - Values: PE = Pre-Election (F450,F460) SE = Supplemental Pre-elect (F450,F460) SY = Special Odd-Yr. Campaign (F450,F460) SA = Semi-annual (F450,F460) TS = Termination Statement (F450,F460) QT = Quarterly Stmt (F450,F460) S1 = Semi-Annual (Jan1-Jun30) (F425) S2 = Semi-Annual (Jul1-Dec31) (F425) (Null value {not Req.} on F461, F401, F465, F496, F498)
12 Cx		Rpt_ID_Num	30	Identifying Report Number on a Late Ctrib/Payment Rpt

or an Ind Exp Report (Req. on F465, F496, F497 & F498).  
(This user assigned value is printed in the Report No.  
and Amended Report No. fields on 496 & 497 forms and  
is printed on electronic versions of 465 & 498 forms.)

13 Cx	From_Date	8	Reporting Period From Date (not Req. on F496,497,498)
14 Cx	Thru_Date	8	Reporting Period Through Date (not Req. on F496,497,498)
15 C	Elect_Date	8	Date of the General Election (Req. on F450,F460,F461,F465 in even years)

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

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R{x}	#	C{x}	Field Name	Max Len	Description
-----	-----	-----	-----	-----	-----
16 R			Filer_Adr1	55	Street 1 of Filing Entity
17 O			Filer_Adr2	55	Street 2 of Filing Entity
18 R			Filer_City	30	City of Filing Entity
19 R			Filer_ST	2	State of Filing Entity
20 R			Filer_ZIP4	10	ZIP+4 of Filing Entity
21 O			Filer_Phon	20	Phone Number of Filing Entity
22 O			Filer_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
23 O			File_Email	60	Email Address {not mapped to present FPPC forms}
24 O			Mail_Adr1	55	Street 1 Mailing Address of Filer (if different)
25 O			Mail_Adr2	55	Street 2 Mailing Address of Filer (if different)
26 C			Mail_City	30	City Mailing Address of Filer (if different)
27 C			Mail_ST	2	State Mailing Address of Filer (if different)
28 C			Mail_ZIP4	10	ZIP+4 Mailing Address of Filer (if different)
(Tres. fields #29 - 40 not used on F496 & F497 filings)					
29 C			Tres_NamL	200	Treasurer or Responsible Officer's Last name
30 C			Tres_NamF	45	Treasurer or Responsible Officer's First name
31 O			Tres_NamT	10	Treasurer or Responsible Officer's Prefix or Title
32 O			Tres_NamS	10	Treasurer or Responsible Officer's Suffix
33 C			Tres_Adr1	55	Treasurer or Responsible Officer Street 1
34 O			Tres_Adr2	55	Treasurer or Responsible Officer Street 2
35 C			Tres_City	30	Treasurer or Responsible Officer City
36 C			Tres_ST	2	Treasurer or Responsible Officer State
37 C			Tres_ZIP4	10	Treasurer or Responsible Officer ZIP+4
38 O			Tres_Phon	20	Treasurer or Responsible Officer Phone
39 O			Tres_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
40 O			Tres_Email	60	Email Address {not mapped to present FPPC forms}
41 C			Cmtte_Type	1	Type of Recipient Committee (Req on F450 & F460) Value: C = Cand/Officeholder Controlled Cmtte [460] P = Cand/Officeholder Primarily Formed [450 460] B = Ballot Measure Committee [450 460] G = General Purpose Committee [450 460]
42 C			Control_YN	1	Controlled Committee? (Yes/No) (Required on F450, F460/Cmtte_Type=B)
43 C			Sponsor_YN	1	Sponsored Committee? (Yes/No) (Required on F450, F460/Cmtte_Type=[B G])

44	C	PrimFrm_YN	1	Primarily Formed Committee? (Yes/No) (Required on F460/Cmtte_Type=B)
45	C	BrdBase_YN	1	Broad Based Committee? (Yes/No) (Required on F450 & F460/Cmtte_Type=G)
46	C	AmendExp_1	100	Amendment Explanation line 1 ( Req if Report_Num > 0 )
47	O	AmendExp_2	100	Amendment Explanation line 2 < and if Form_Type=F460 )
48	O	AmendExp_3	100	Amendment Explanation line 3

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS

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Note: Remainder of CVR record starting with Field #49 is  
parsed depending on the value contained Form\_Type.

Note: Forms F425, F450, F497 & F498 do not use variable part of CVR layout.

----- Following variable fields used when Form\_Type=F401 -----

R{x}			Max	
# C{x}	Field Name	Len	Description	
49 O	Rpt_Att_CB	1	Committee Report "Attached" check-box	
50 C	Cmtte_ID	9	Committee ID (Filer_ID) of Recipient Committee	
51 C	ReportName	3	Campaign Disclosure Statement - Value: [450 460 461]	
52 C	RptFromDt	8	Campaign Disclosure Statement - Period From Date	
53 C	RptThruDt	8	Campaign Disclosure Statement - Period Through Date	

----- Following variable fields used when Form\_Type=F461 -----

R{x}			Max	
# C{x}	Field Name	Len	Description	
49 O	EmplBus_CB	1	Employer/Business info included check-box	
50 C	Bus_Name	200	Name of Employer/Business	
51 C	Bus_Adr1	55	Employer/Business Street 1	
52 O	Bus_Adr2	55	Employer/Business Street 2	
53 C	Bus_City	30	Employer/Business City	
54 C	Bus_ST	2	Employer/Business State	
55 C	Bus_ZIP4	10	Employer/Business ZIP+4	
56 C	Bus_Inter	40	Employer/Business Interests	
57 O	BusAct_CB	1	Business Activity info included check-box	
58 C	BusActivity	90	Business Activity description	
59 O	Assoc_CB	1	Association Interests info included check-box	
60 C	Assoc_Int	90	Association Interests description	
61 O	Other_CB	1	Other Entity Interests info included check-box	
62 C	Other_Int	90	Other Entity Interests description	





COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS (Continued)

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----- Following variable fields used when Form\_Type =[F460|465|496] -----

R{x}		Max	
# C{x}	Field Name	Len	Description
-----	-----	---	-----
49 R	Cand_NamL	200	Candidate/Officeholder's Last name
50 R	Cand_NamF	45	Candidate/Officeholder's First name
51 O	Cand_NamT	10	Candidate/Officeholder's Prefix or Title
52 O	Cand_NamS	10	Candidate/Officeholder's Suffix
53 R	Cand_Adr1	55	Candidate/Officeholder Street 1
54 O	Cand_Adr2	55	Candidate/Officeholder Street 2
55 R	Cand_City	30	Candidate/Officeholder City
56 R	Cand_ST	2	Candidate/Officeholder State
57 R	Cand_ZIP4	10	Candidate/Officeholder ZIP+4
58 O	Cand_Phon	20	Candidate/Officeholder Phone
59 O	Cand_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
60 O	Cand_Email	60	Email Address {not mapped to present FPPC forms}
61 C	Bal_Name	200	Ballot Measure Name
62 C	Bal_Num	3	Ballot Number or Letter
63 C	Bal_Juris	40	Jurisdiction of Ballot Measure
64 C	Office_Cd	3	Office Sought (See table of code in Overview)
65 C	Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
66 C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
67 C	Juris_Dscr	40	Office Jurisdiction Description (Req. if Juris_Cd=[CIT CTY LOC OTH])
68 C	Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
69 O	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
70 R	Sup_Opp_Cd	1	Support/Oppose? Values: S; O

Code F425/Part-1 & F450/Part-3 Name/Address info for Assistant Treasurer on  
CVR2 records with CVR2.Entity\_Cd='ATR'.

Code F460 Name/Addr info for Assistant Treasurer on CVR2 records with  
CVR2.Entity\_Cd='ATR' and CVR2.F460\_Part='3'.

Code ADDITIONAL F460/Part-4a Officeholder/Candidate info on CVR2 records with  
CVR2.Entity\_Cd='CAO' and CVR2.F460\_Part='4a'.

Code F460/Part-4b Name/Addr info for Related Committees on CVR2 records with  
CVR2.Entity\_Cd=['COM'|'CTL'|'RCP'] and CVR2.F460\_Part='4b'.

Code ADDITIONAL F460/Part-5a Ballot Measure info on CVR2 records with  
CVR2.Entity\_Cd='BNM' and CVR2.F460\_Part='5a'.

Code F460/Part-5b Officeholder/Candidate/Proponent info on CVR2 records with  
CVR2.Entity\_Cd=['CAO'|'PRO'] and CVR2.F460\_Part='5b'.

Code F460/Part-6 Name/Addr info for Candidate/Officeholder on CVR2 records with  
CVR2.Entity\_Cd='CAO' and CVR2.F460\_Part='6'.

Code F465/Part-5 Name/Addr info for Filing Officers on CVR2 records with  
CVR2.Entity\_Cd='OFF'.

COVER PAGE RECORD LAYOUT FOR F470 OFFICEHOLDER/CAND SHORT/SUPPLEMENT

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R{x} # C{x}	Field Name	Max Len	Description
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01 Rx	Rec_Type	3	Record Type Value: CVR
02 Rx	Form_Type	4	Type of Filing or Form set. Value: F470
03 Rx	Filer_ID	9	Committee ID number of Filer
04 O	Entity_Cd	3	Values: CAO - Candidate/Office-holder
05 Rx	Filer_NamL	200	Filer's Last name
06 R	Filer_NamF	45	Filer's First name(s) (Required for persons)
07 O	Filer_NamT	10	Filer's Prefix or Title
08 O	Filer_NamS	10	Filer's Suffix
09 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999
10 Rx	Rpt_Date	8	Date this report is filed
11 R	Cand_Adr1	55	Street 1 of Filing Candidate/Officeholder
12 O	Cand_Adr2	55	Street 2 of Filing Candidate/Officeholder
13 R	Cand_City	30	City of Filing Candidate/Officeholder
14 R	Cand_ST	2	State of Filing Candidate/Officeholder
15 R	Cand_ZIP4	10	ZIP+4 of Filing Candidate/Officeholder
16 O	Cand_Phon	20	Phone of Filing Candidate/Officeholder
17 O	Cand_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
18 O	Cand_Email	60	Email Address {not mapped to present FPPC forms}
19 R	Office_Cd	3	Office Sought (See table of code in Overview)
20 C	Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
21 R	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
22 C	Juris_Dscr	40	Office Jurisdiction Descrip (Req. if Juris_Cd=[CIT CTY LOC OTH])
23 C	Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
24 O	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
25 C	Elect_Date	8	Date of the General Election (Req. in even years)

26 0    Date\_1000            8    Date Contribs Totaling 1,000 or more Received

Code F470/Part-4 Name/Addr info for Related Committees on CVR2 records with  
CVR2.Entity\_Cd=[ 'COM' | 'CTL' | 'RCP' ].

COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT

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R{x}			Max	
# C{x}	Field Name	Len	Description	
-----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: CVR2	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F425; F450; F460; F465; F470; {F400; F410 - See Section 2}; {F625; F635 - See Section 3}; {F601; F602; F603 - See Section 4}	
03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item	

Note: Remainder of CVR2 record is parsed depending on value of Form\_Type.

Note: See Section 2 for CVR2 layouts used with F400 & F410 filings.

See Section 3 for CVR2 layouts used with F625 & F635 filings.

See Section 4 for CVR2 layouts used with F601, F602 & F603 filings.

----- Following variable F465 {Part V} fields used when Form\_Type=F465 -----

R{x}			Max	
# C{x}	Field Name	Len	Description	
-----	-----	---	-----	
04 O	Entity_Cd	3	Values: CAO - Candidate/Officeholder POF - Principal (filing) officer	
05 R	Title	90	Official Title of Filing Officer	

06	R	Mail_Adr1	55	Address
07	O	Mail_Adr2	55	Optional 2nd line of Address
08	R	Mail_City	30	City
09	R	Mail_ST	2	State code
10	R	Mail_ZIP4	10	Zip+4

COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Cont.)

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----- Following fields used for F425 Part/1; F450 Part/3; F460 (Parts 3, 4a,  
----- 4b, 5a, 5b & 6) and F470/Part IV when Form\_Type=[F425|F450|F460|F470].

R{x}	# C{x}	Field Name	Max Len	Description
04 Rx		Entity_Cd	3	Values: ATR - Assistant Treasurer (F425-P1, F450-P3, F460-P3) CAO - Cand/Officeholder (F460-P4a*, F460-P5b, F460-P6) COM - Committee (F460-P4b & F470-P4) CTL - Controlled Cmtte (F460-P4b & F470-P4) RCP - Recipient Cmtte (F460-P4b & F470-P4) PRO - Proponent (F460-P5b) BNM - Ballot Measure (F460-P5a*) * CVR2 record(s) used for ADDITIONAL entries on F460 Part-4a and F460 Part-5a (if any).
05 Cx		F460_Part	2	Part of 460 cover page coded on this CVR2 record. Values: 3, 4a, 4b, 5a, 5b, or 6. (Req on F460 filings) (note: 4a/4b & 5a/5b are "top/bottom" of Parts 4 & 5)
06 C		Cmte_ID	9	Committee ID (Req. when Entity_Cd=[COM CTL RCP])
07 R		Enty_NamL	200	Entity [Last] Name (Committee, Candidate, etc.)
08 C		Enty_NamF	45	Entity's First name (Req. when Entity_Cd=CAO)
09 O		Enty_NamT	10	Entity's Prefix or Title
10 O		Enty_NamS	10	Entity's Suffix
11 C		Enty_Adr1	55	Street 1 of Filing Committee
12 O		Enty_Adr2	55	Street 2 of Filing Committee
13 C		Enty_City	30	City of Filing Committee
14 C		Enty_ST	2	State of Filing Committee
15 C		Enty_ZIP4	10	ZIP+4 of Filing Committee
16 O		Enty_Phon	20	Phone of Filing Committee
17 O		Enty_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
18 O		Enty_Email	60	Email Address {not mapped to present FPPC forms}
19 C		Tres_NamL	200	Treasurer's Last name
20 C		Tres_NamF	45	Treasurer's First name
21 O		Tres_NamT	10	Treasurer's Prefix or Title
22 O		Tres_NamS	10	Treasurer's Suffix
23 C		Control_YN	1	Controlled Committee? Yes/No (Req. on F460/P4)
24 C		Office_Cd	3	Office Sought (See table of code in Overview)
25 C		Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
26 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District;



			CIT=City; CTY=County; LOC=Local; OTH=Other
27	C	Juris_Dscr	40 Office Jurisdiction Descrip (Req. if Juris_Cd=[CIT CTY LOC OTH]
28	C	Dist_No	3 Office District Number (Req. if Juris_Cd=[SEN ASM BOE]
29	C	Off_S_H_Cd	1 Office Sought/Held Code: H=Held; S=Sought
30	C	Bal_Name	200 Ballot Measure Name
31	C	Bal_Num	7 Ballot Number or Letter
32	C	Bal_Juris	40 Jurisdiction
33	C	Sup_Opp_Cd	1 Support/Oppose? Values: S; O

COVER PAGE (VERIFICATION INFORMATION) RECORD LAYOUT

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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01	Rx	Rec_Type	4	Record Type Value: CVR3
02	Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F401; F425; F450; F460; F461; F465; F470; {F400; F402; F410 - see Sect. 2}
03	Rx	Tran_ID	20	Transaction ID - permanent value unique to this item
04	Rx	Entity_Cd	3	Values: TRE - Treasurer ATR - Assistant Treasurer CAO - Candidate/Office-holder OFF - Officer (Responsible) PRO - Proponent (F460 - Bal Measure Cmtte) SPO - Sponsor (F460 - Gen Purpose Cmtte)
05	R	Sig_Date	8	Date when signed
06	O	Sig_Loc	45	City and State where signed
07	R	Sig_NamL	200	Signer's "as signed" Last name
08	R	Sig_NamF	45	Signer's "as signed" First name
09	O	Sig_NamT	10	Signer's "as signed" Prefix or Title
10	O	Sig_NamS	10	Signer's "as signed" Suffix

AMENDMENT INFORMATION (a.k.a.. Form 405; Part II)

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R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: F405	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F450; F460; F461	
03 Rx	Exec_Date	8	Date this Amendment executed on	
04 Rx	From_Date	8	Report Period From Date of Original Report	
05 Rx	Thru_Date	8	Report Period To/Through Date of Original Report	

----- At least one of the Check-boxes below must be "checked"

06 O	Cover_CB	1	Cover Page is amended check-box
07 O	Alloc_CB	1	Allocation Page is amended check-box
08 O	SumPg_CB	1	Summary Page is amended check-box
09 O	Sched_CB	1	Schedule(s) are amended check-box
10 Cx	Sched_Lst	40	List of amended Schedule(s) (Req. if Sched_CB=X)
11 O	Parts_CB	1	Part(s) are amended check-box
12 Cx	Parts_Lst	40	List of amended Part(s) (Req. if Parts_CB=X)

13 Rx	Amend_Txt1	330	Description of changes. (6 lines of 55 char 9pt text)
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CONTRIBUTION INFORMATION (a.k.a.. Form 495; Part II)

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R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: F495	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F450; F460	

03	R	Elect_Date	8	Date of the General Election (same as on CVR rec)
04	Rx	ElectJuris	40	Jurisdiction of the Election
05	Rx	ContribAmt	12	Contribution Amount (6mos prior - 17days before)

SUMMARY TOTALS RECORD LAYOUT

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R{x}	# C{x}	Field Name	Max Len	Description
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01 Rx		Rec_Type	4	Record Type Value: SMRY
02 Rx		Form_Type	8	Name of Filing Form or Schedule Name
03 Rx		Line_Item	8	Line Number of Summary Total
04 o		Amount_A	12	Summary Amount - (Column A on some forms)
05 o		Amount_B	12	Summary Amount - Column B
06 o		Amount_C	12	Summary Amount - Column C

Note: Amount(s) may have a null or zero value if there is no dollar total to be conveyed. SMRY records with null/zero Amount(s) do not have to be coded within a filing. Amount(s) are assumed to be zero in the absence of a SMRY record.

Examples:

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F460 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F460,1,Amt_A,Amt_B,Amt_C	-->	SMRY,F460,11,Amt_A,Amt_B,Amt_C
SMRY,F460,12,Amt_A	-->	SMRY,F460,19,Amt_A
SMRY,F460,20,Amt_A,Amt_B	-->	SMRY,F460,21,Amt_A,Amt_B
SMRY,A,1,Amt_A	-->	SMRY,A,3,Amt_A
SMRY,B1,1,Amt_A	-->	SMRY,B1,3,Amt_A
SMRY,B2,4,Amt_A	-->	SMRY,B2,7,Amt_A
SMRY,B2,d,Amt_A		
SMRY,B3,0,Amt_A	{although there is no	B3 line-item#, code Line_Item=0 (zero)}
SMRY,C,1,Amt_A	-->	SMRY,C,3,Amt_A
SMRY,D,1,Amt_A	-->	SMRY,D,3,Amt_A
SMRY,E,1,Amt_A	-->	SMRY,E,4,Amt_A
SMRY,F,1,Amt_A	-->	SMRY,F,3,Amt_A
SMRY,H1,1,Amt_A	-->	SMRY,H1,3,Amt_A

```
SMRY,H2,4,Amt_A      -->    SMRY,H2,7,Amt_A
SMRY,H2,b,Amt_A
SMRY,H3,0,Amt_A      {although there is no H3 line-item#, code Line_Item=0 (zero)}
SMRY,I,1,Amt_A       -->    SMRY,I,4,Amt_A
```

F450 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F450,1,Amt_A	-->	SMRY,F450,15,Amt_A

F461 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F461,1,Amt_A	-->	SMRY,F461,5,Amt_A

F465 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F465,1,Amt_A	-->	SMRY,F465,3,Amt_A

F401 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F401,1,Amt_A,Amt_B	-->	SMRY,F401,2,Amt_A,Amt_B
SMRY,401A,1,Amt_A	-->	SMRY,401A,3,Amt_A
SMRY,401B,1,Amt_A	-->	SMRY,401B,3,Amt_A
SMRY,401B-1,0,Amt_A	{B-1 has no line#, code a '0' (zero)}	

RECEIPTS SCHEDULES (A, C, I, A-1 and F401A)

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R{x}	# C{x}	Field Name	Max Len	Description
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01 Rx		Rec_Type	4	Record Type Value: RCPT
02 Rx		Form_Type	5	Sched Name: A = Sched A / Monetary; C = Sched C / Non-monetary; I = Sched I / Misc. to Cash; A-1 = Sched A-1 / Trans Contribs F401A = Payments Received
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		Entity_Cd	3	Values: [COM RCP] - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
05 C		Ctrib_NamL	200	Contributor's Last name
06 C		Ctrib_NamF	45	Contributor's First name
07 O		Ctrib_NamT	10	Contributor's Prefix or Title
08 O		Ctrib_NamS	10	Contributor's Suffix
09 C		Ctrib_Adr1	55	Address of Contributor
10 O		Ctrib_Adr2	55	Optional 2nd line of Address
11 C		Ctrib_City	30	City
12 C		Ctrib_ST	2	State code
13 C		Ctrib_ZIP4	10	Zip+4
14 C		Ctrib_Emp	200	Employer (Sched A, C - Req. if Entity = 'IND')
15 C		Ctrib_Occ	60	Occupation (Sched A, C - Req. if Entity = 'IND')
16 O		Ctrib_Self	1	Check Box: Self Employed?
17 O		Tran_Type	1	Transaction Type - Values: T = Third Party Repayment; F = Forgiven Loan; R = Returned (Negative Amount?)
18 R		Rcpt_Date	8	Date item Received (or Begin date of date range)
19 O		Date_Thru	8	End-date of date range for Items received
20 R		Amount	12	Amount (Monetary/Inkind/Promise) Received A-1 Amount Transferred from Contributor (Sched A-1)
21 C		Cum_YTD	12	Cumulative YTD Amount (Sched A, 401A, A-1) (Note: Cum Amt. for Special Elect on Sched A-1)
22 C		Cum_Oth	12	Cumulative "Other" (Sched A, A-1) (Note: Cum Amt. for Special Runoff Elect on Sched A-1)
23 C		Ctrib_Dscr	90	Description of Goods/Services Rcvd. (Sched C, I)



24	C	Cmte_ID	9	Committee ID (If [COM RCP] & no ID#, Treas info Req.)
25	C	Tres_NamL	200	Treasurer's Last name (Req if [COM RCP] & no ID#)
26	C	Tres_NamF	45	Treasurer's First name (Req if [COM RCP] & no ID#)
27	O	Tres_NamT	10	Treasurer's Prefix or Title
28	O	Tres_NamS	10	Treasurer's Suffix
29	C	Tres_Adr1	55	Treasurer Street 1 (Req if [COM RCP] & no ID#)
30	O	Tres_Adr2	55	Treasurer Street 2

RECEIPTS SCHEDULES (Continued)

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R{x}	# C{x}	Field Name	Max Len	Description
		-----	----	-----
31 C		Tres_City	30	Treasurer City
32 C		Tres_ST	2	Treasurer State
33 C		Tres_ZIP4	10	Treasurer Phone

----- Intermediary fields (Intr\_NamL - Intr\_Self) do not apply to F401A

34 O		Intr_NamL	200	Intermediary's Last name
35 O		Intr_NamF	45	Intermediary's First name
36 O		Intr_NamT	10	Intermediary's Prefix or Title
37 O		Intr_NamS	10	Intermediary's Suffix
38 C		Intr_Adr1	55	Intermediary Street 1
39 O		Intr_Adr2	55	Intermediary Street 2
40 C		Intr_City	30	Intermediary City
41 C		Intr_ST	2	Intermediary State
42 C		Intr_ZIP4	10	Intermediary ZIP+4
43 C		Intr_Emp	200	Employer (Sched A, C)
44 C		Intr_Occ	60	Occupation (Sched A, C)
45 O		Intr_Self	1	Check Box: Self Employed?

----- Fields 46 - 59 used on F401A -----

46 C		Cand_NamL	200	Candidate's Last name
47 C		Cand_NamF	45	Candidate's First name
48 O		Cand_NamT	10	Candidate's Prefix or Title
49 O		Cand_NamS	10	Candidate's Suffix
50 C		Office_Cd	3	Office Sought (See table of code in Overview)
51 C		Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
52 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
53 C		Juris_Dscr	40	Office Jurisdiction Descrip (Req. if Juris_Cd=[CIT CTY LOC OTH])
54 C		Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
55 O		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
56 O		Bal_Name	200	Ballot Measure Name
57 O		Bal_Num	7	Ballot Number or Letter
58 O		Bal_Juris	40	Jurisdiction
59 C		Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F401)

60	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
61	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
62	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record
63	O	XRef_SchNm	2	Related item is included on Sched 'B2' or 'F'
64	O	XRef_Match	1	X = Related item on other Sched has same Tran_ID

EXPENDITURE SCHEDULES (D, E, G, F450P5, F461P5, F465P3)

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R{x}	# C{x}	Field Name	Max Len	Description
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	01 Rx	Rec_Type	4	Record Type Value: EXPN
	02 Rx	Form_Type	6	Schedule Name/ID Values: D = Sched D / Summary of Expend Sup/Opp ... E = Sched E / Expenditures made G = Sched G / Payments made on Behalf F450P5 = F450 / Part 5 Exp & Contrib made; F461P5 = F461 / Part 5 Exp & Contrib made F465P3 = F465 / Independent Expenditures Made
	03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item
	04 R	Entity_Cd	3	Values: [COM RCP] - Recipient Committee; IND - Individual; OTH - Other
	05 C	Payee_NamL	200	Payee's Last name
	06 C	Payee_NamF	45	Payee's First name
	07 O	Payee_NamT	10	Payee's Prefix or Title
	08 O	Payee_NamS	10	Payee's Suffix
	09 C	Payee_Adr1	55	Address of Payee
	10 O	Payee_Adr2	55	Optional 2nd line of Address
	11 C	Payee_City	30	City
	12 C	Payee_ST	2	State code
	13 C	Payee_ZIP4	10	Zip+4
	14 C	Expn_Date	8	Date of Expenditure (Note: Date not on Sched E & G)
	15 R	Amount	12	Amount of Payment
	16 C	Cum_YTD	12	Cumulative / YTD Amt (No Cumulatives on Sched E & G)
	17 C	Cum_Oth	12	Cumulative / "Other" (No Cumulatives on Sched E & G)
	18 O	Expn_ChkNo	20	Check Number (Optional)
	19 C	Expn_Code	3	Expense Code - Values: (Refer to list in Overview) Note: CTB & IND need explanation & listing on Sched D TRC & TRS require explanation.
	20 C	Expn_Dscr	90	Purpose of Expense and/or Description/explanation

21	C	Agent_NamL	200	Agent or Ind. Contractor's Last name (Sched G)
22	C	Agent_NamF	45	Agent or Ind. Contractor's First name
23	O	Agent_NamT	10	Agent or Ind. Contractor's Prefix or Title
24	O	Agent_NamS	10	Agent or Ind. Contractor's Suffix

EXPENSE SCHEDULES (Continued)

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R{x}	# C{x}	Field Name	Max Len	Description
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----- Fields 25 - 34 are NOT used on F460/Sched D -----

25 C	Cmte_ID	9	Committee ID (If [COM RCP] & no ID#, Treas info Req.)
26 C	Tres_NamL	200	Treasurer's Last name (Req if [COM RCP] & no ID#)
27 C	Tres_NamF	45	Treasurer's First name (Req if [COM RCP] & no ID#)
28 O	Tres_NamT	10	Treasurer's Prefix or Title
29 O	Tres_NamS	10	Treasurer's Suffix
30 C	Tres_Adr1	55	Treasurer Street 1 (Req if [COM RCP] & no ID#)
31 O	Tres_Adr2	55	Treasurer Street 2
32 C	Tres_City	30	Treasurer City
33 C	Tres_ST	2	Treasurer State
34 C	Tres_ZIP4	10	Treasurer ZIP+4

----- Fields 35 - 48 used on F450/Part5, F460/Sched D & F461/Part5 -----

35 C	Cand_NamL	200	Candidate's Last name
36 C	Cand_NamF	45	Candidate's First name
37 O	Cand_NamT	10	Candidate's Prefix or Title
38 O	Cand_NamS	10	Candidate's Suffix
39 C	Office_Cd	3	Office Sought (See table of code in Overview)
40 C	Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
41 C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
42 C	Juris_Dscr	40	Office Jurisdiction Descrip (Req. if Juris_Cd=[CIT CTY LOC OTH])
43 C	Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
44 O	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
45 O	Bal_Name	200	Ballot Measure Name
46 O	Bal_Num	7	Ballot Number or Letter
47 O	Bal_Juris	40	Jurisdiction
48 C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F450, F461)
49 O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)

50	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
51	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record
52	O	G_From_E_F	1	Back Reference from Sched G to Sched 'E' or 'F'?
53	O	XRef_SchNm	2	Related item is included on Sched 'C' or 'H2'
54	O	XRef_Match	1	X = Related item on other Sched has same Tran_ID

ACCRUED EXPENSES (UNPAID BILLS) SCHEDULE (F)

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R{x}		Field Name	Max Len	Description
# C{x}				
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01 Rx		Rec_Type	4	Record Type Value: DEBT
02 Rx		Form_Type	1	Schedule Name/ID Value: F = Sched F / Accrued Expenses
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		Entity_Cd	3	Values: [COM RCP] - Recipient Committee; IND - Individual; OTH - Other
05 R		Payee_NamL	200	Payee's Last name
06 C		Payee_NamF	45	Payee's First name
07 O		Payee_NamT	10	Payee's Prefix or Title
08 O		Payee_NamS	10	Payee's Suffix
09 R		Payee_Adr1	55	Address of Payee
10 O		Payee_Adr2	55	Optional 2nd line of Address
11 R		Payee_City	30	City
12 R		Payee_ST	2	State code
13 R		Payee_ZIP4	10	Zip+4
14 R		Beg_Bal	12	Outstanding balance at beginning of this period
15 C		Amt_Incur	12	Amount incurred this period
16 C		Amt_Paid	12	Amount paid this period
17 C		End_Bal	12	Outstanding balance at close of this period
18 C		Expn_Code	3	Expense Code - Values: (Refer to list in Overview) Note: CTB & IND need explanation & listing on Sched D TRC & TRS require explanation.
19 C		Expn_Dscr	90	Purpose of Expense and/or Description/explanation



ACCRUED EXPENSES SCHEDULE (Continued)

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R{x}		Field Name	Max Len	Description
# C{x}				
20 C		Cmte_ID	9	Committee ID (If [COM RCP] & no ID#, Treas info Req.)
21 C		Tres_NamL	200	Treasurer's Last name (Req if [COM RCP] & no ID#)
22 C		Tres_NamF	45	Treasurer's First name (Req if [COM RCP] & no ID#)
23 O		Tres_NamT	10	Treasurer's Prefix or Title
24 O		Tres_NamS	10	Treasurer's Suffix
25 C		Tres_Adr1	55	Treasurer Street 1 (Req if [COM RCP] & no ID#)
26 O		Tres_Adr2	55	Treasurer Street 2
27 C		Tres_City	30	Treasurer City
28 C		Tres_ST	2	Treasurer State
29 C		Tres_ZIP4	10	Treasurer ZIP+4
30 O		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
31 O		Memo_RefNo	20	Reference to text contained in a TEXT record.
32 O		BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record
33 O		XRef_SchNm	2	Related item is included on Sched 'C'
34 O		XRef_Match	1	X = Related item on other Sched has same Tran_ID

LOAN SCHEDULES / RECEIVED (B1, B2, B3) & MADE (H1, H2, H3)

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R{x}	# C{x}	Field Name	Max Len	Description
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01 Rx		Rec_Type	4	Record Type Value: LOAN
02 Rx		Form_Type	2	Schedule Name/ID Values: B1 = Sched B Part I / Loans Received; B2 = Sched B Part II / Repayments; B3 = Sched B Part III / Outstanding Bal; H1 = Sched H, Part I / Loans Made; H2 = Sched H, Part II / Repayments Rcvd; H3 = Sched H, Part III / Outstanding Loan;
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 C		Loan_TYPE	3	Loan Type: Sched B1 Values: B1L=Lender; B1G=Guarantor Sched B2 Values: B2R=Repay; B2F=Forgiven B2T=Third party payment Sched H2 Values: H2R=Repay; H2F=Forgiven H2T=Third party payment (Not used for Sched B3, H1, and H3)
05 C		Entity_Cd	3	Values: [COM RCP] - Recipient Committee; (Req. on B1) IND - Individual; OTH - Other
06 R		Lndr_NamL	200	Lender's Last name
07 C		Lndr_NamF	45	Lender's First name (if a person)
08 O		Lndr_NamT	10	Lender's Prefix or Title
09 O		Lndr_NamS	10	Lender's Suffix
10 R		Loan_Adr1	55	Address Line 1
11 R		Loan_Adr2	55	Address Line 2
12 R		Loan_City	30	City
13 R		Loan_ST	2	State Code
14 R		Loan_ZIP4	10	ZIP+4

LOAN SCHEDULES / RECEIVED & MADE (Continued)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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Schedule B; Part I definitions (B1) -----

15	R	Loan_Date1	8	B1 - Date Loan Received (Original Date)
16	R	Loan_Date2	8	B1 - Date Loan Due
17	R	Loan_Amt1	12	B1 - Loan Amount / Guarantor Amount
18	N/A	Loan_Amt2	12	N/A (Not used for Sched B; Part I)
19	C	Loan_Amt3	12	B1 - Cumulative / Year-to-date
20	C	Loan_Amt4	12	B1 - Cumulative / Other
21	R	Loan_Rate	30	B1 - Interest Rate

Schedule B; Part II definitions (B2) -----

15	R	Loan_Date1	8	B2 - Original Date of Loan
16	R	Loan_Date2	8	B2 - Date Repaid/Forgiven (see Loan_TYPE)
17	C	Loan_Amt1	12	B2 - Repaid/Forgiven Amount (Req if no Loan_Amt3)
18	R	Loan_Amt2	12	B2 - Outstanding Principal
19	C	Loan_Amt3	12	B2 - Interest Paid (Req if no Loan_Amt1)
20	N/A	Loan_Amt4	12	N/A (Not used for Sched B; Part II)
21	C	Loan_Rate	30	B2 - Int. Rate (if changed)

Schedule B; Part III definitions (B3) -----

15	R	Loan_Date1	8	B3 - Original Date of Loan
16	N/A	Loan_Date2	8	N/A (Not used for Sched B; Part III)
17	R	Loan_Amt1	12	B3 - Original Amt. of Loan
18	R	Loan_Amt2	12	B3 - Unpaid Balance
19	R	Loan_Amt3	12	B3 - Unpaid Interest
20	N/A	Loan_Amt4	12	N/A (Not used for Sched B; Part III)
21	N/A	Loan_Rate	30	N/A (Not used for Sched B; Part III)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

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R{x}	Field Name	Max Len	Description
# C{x}			

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Schedule H; Part I definitions (H1) -----

15 R	Loan_Date1	8	H1 - Date Loan Made (Original Date)
16 R	Loan_Date2	8	H1 - Date Loan Due
17 R	Loan_Amt1	12	H1 - Amount of Loan
18 N/A	Loan_Amt2	12	N/A (Not used for Sched H; Part I)
19 N/A	Loan_Amt3	12	N/A (Not used for Sched H; Part I)
20 N/A	Loan_Amt4	12	N/A (Not used for Sched H; Part I)
21 R	Loan_Rate	30	H1 - Interest Rate

Schedule H; Part II definitions (H2) -----

15 R	Loan_Date1	8	H2 - Original Date of Loan
16 R	Loan_Date2	8	H2 - Date Repaid/Forgiven (see Loan_TYPE)
17 C	Loan_Amt1	12	H2 - Repaid/Forgiven Amount (Req if no Loan_Amt3)
18 R	Loan_Amt2	12	H2 - Outstanding Principal
19 C	Loan_Amt3	12	H2 - Interest Received (Req if no Loan_Amt1)
20 N/A	Loan_Amt4	12	N/A (Not used for Sched H; Part II)
21 C	Loan_Rate	30	H2 - Int. Rate (if changed)

Schedule H; Part III definitions (H3) -----

15 R	Loan_Date1	8	H3 - Original Date of Loan
16 N/A	Loan_Date2	8	N/A (Not used for Sched H; Part III)
17 R	Loan_Amt1	12	H3 - Original Amt. of Loan
18 R	Loan_Amt2	12	H3 - Unpaid Principal
19 R	Loan_Amt3	12	H3 - Unpaid Interest
20 N/A	Loan_Amt4	12	N/A (Not used for Sched H; Part III)
21 N/A	Loan_Rate	30	N/A (Not used for Sched H; Part III)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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22	C	Loan_EMP	200	Employer (If Sched B1, Part I)
23	C	Loan_OCC	60	Occupation (If Sched B1, Part I)
24	O	Loan_Self	1	Check Box: Self Employed?

----- Fields 25 - 34 are only used on F460/Sched B1 -----

25	C	Cmte_ID	9	Committee ID (If [COM RCP] & no ID#, Treas info Req.)
26	C	Tres_NamL	200	Treasurer's Last name (Req if B1, [COM RCP] & no ID#)
27	C	Tres_NamF	45	Treasurer's First name (Req if B1, [COM RCP] & no ID#)
28	O	Tres_NamT	10	Treasurer's Prefix or Title
29	O	Tres_NamS	10	Treasurer's Suffix
30	C	Tres_Adr1	55	Treasurer Street 1 (Req if B1, [COM RCP] & no ID#)
31	O	Tres_Adr2	55	Treasurer Street 2
32	C	Tres_City	30	Treasurer City
33	C	Tres_ST	2	Treasurer State
34	C	Tres_ZIP4	10	Treasurer ZIP+4

35	O	Intr_NamL	200	Intermediary's Last name
36	O	Intr_NamF	45	Intermediary's First name
37	O	Intr_NamT	10	Intermediary's Prefix or Title
38	O	Intr_NamS	10	Intermediary's Suffix
39	C	Intr_Adr1	55	Intermediary Street 1
40	O	Intr_Adr2	55	Intermediary Street 2
41	C	Intr_City	30	Intermediary City
42	C	Intr_ST	2	Intermediary State
43	C	Intr_ZIP4	10	Intermediary ZIP+4

44	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
45	O	Memo_RefNo	20	Reference to text contained in a TEXT record.

46	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record
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47	O	XRef_SchNm	2	Related item is included on Sched 'A' or 'E'
48	O	XRef_Match	1	'X' = Related item on other Sched has same Tran_ID



Form 401 Payment & Other Disclosure Sched (F401B, F401B-1, F401C, F401D)

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: S401
02 Rx		Form_Type	7	Sched Name: F401B = Payments Made F401B-1 = Payments Made in Behalf of F401C = Persons Receiving \$1000 + F401D = Cand/Measure not on Sched F401A
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 C		Agent_NamL	200	Agent's Last name (401B-1)
05 O		Agent_NamF	45	Agent's First name
06 O		Agent_NamT	10	Agent's Prefix or Title
07 O		Agent_NamS	10	Agent's Suffix
08 C		Payee_NamL	200	Payee's Last name
09 O		Payee_NamF	45	Payee's First name
10 O		Payee_NamT	10	Payee's Prefix or Title
11 O		Payee_NamS	10	Payee's Suffix
12 C		Payee_Adr1	55	Address
13 O		Payee_Adr2	55	Optional 2nd line of Address
14 C		Payee_City	30	City
15 C		Payee_ST	2	State code
16 C		Payee_ZIP4	10	Zip+4
17 C		Amount	12	Amount (Sched F401B, F401B-1, F401C)
18 C		Aggregate	12	Aggregate YTD Amount (Sched F401C)
19 C		Expn_Dscr	90	Purpose of Expense and/or Description
----- Fields 20 - 33 used on F401D -----				
20 C		Cand_NamL	200	Candidate's Last name
21 C		Cand_NamF	45	Candidate's First name
22 O		Cand_NamT	10	Candidate's Prefix or Title
23 O		Cand_NamS	10	Candidate's Suffix
24 C		Office_Cd	3	Office Sought (See table of code in Overview)
25 C		Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
26 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
27 C		Juris_Dscr	40	Off. Juris. Dscrip (Req. if Juris_Cd=[CIT CTY LOC OTH])
28 C		Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
29 O		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought

30	O	Bal_Name	200	Ballot Measure Name
31	O	Bal_Num	7	Ballot Number or Letter
32	O	Bal_Juris	40	Jurisdiction
33	C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F401)
34	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
35	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
36	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record



Form 496 Late Independent Expenditures Made

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R{x}			Max	
# C{x}	Field Name	Len	Description	
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01 Rx	Rec_Type	4	Record Type Value: S496	
02 Rx	Form_Type	4	Schedule Name/ID Value: F496 = Independent Expenditures Made	
03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item	
04 C	Amount	12	Expenditure Amount	
05 C	Exp_Date	8	Expenditure Date (Begin date of date range for Items paid)	
06 O	Date_Thru	8	End-date of date range for Items paid	
07 C	Expn_Dscr	90	Purpose of Expenditure and/or Description	
08 O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)	
09 O	Memo_RefNo	20	Reference to text contained in a TEXT record.	

Form 497 Late Contributions Received/Made

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R{x}	# C{x}	Field Name	Max Len	Description
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01 Rx		Rec_Type	4	Record Type Value: S497
02 Rx		Form_Type	6	Schedule Name/ID Value: F497P1 = Late Contribution Received Value: F497P2 = Late Contribution Made
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		Entity_Cd	3	Values: CAO - Candidate/Office-holder (F497P2) BNM - Ballot Measure (F497P2) [COM RCP] - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
05 C		Enty_NamL	200	Contributor/Recipient's Last name
06 C		Enty_NamF	45	Contributor/Recipient's First name
07 O		Enty_NamT	10	Contributor/Recipient's Prefix or Title
08 O		Enty_NamS	10	Contributor/Recipient's Suffix
09 C		Enty_Adr1	55	Address of Contributor/Recipient
10 O		Enty_Adr2	55	Optional 2nd line of Address
11 C		Enty_City	30	City
12 C		Enty_ST	2	State code
13 C		Enty_ZIP4	10	Zip+4
14 C		Ctrib_Emp	200	Employer (Sched A, C, D - Req. if Entity = 'IND')
15 C		Ctrib_Occ	60	Occupation (Sched A, C, D - Req. if Entity = 'IND')
16 O		Ctrib_Self	1	Check Box: Self Employed?
17 C		Elec_Date	8	Date of Election (Req. if P2)
18 R		Ctrib_Date	8	Date item Received/Made (Begin date of date range for Items received)
19 O		Date_Thru	8	End-date of date range for Items received
20 R		Amount	12	Amount Received/Made
21 C		Cmte_ID	9	Committee ID (Req. if Entity_Cd=[CAO RCP]... (Absolutely Req. on F497P2 when ... [CAO RCP].)
22 C		Cand_NamL	200	Candidate's Last name
23 C		Cand_NamF	45	Candidate's First name

24	O	Cand_NamT	10	Candidate's Prefix or Title
25	O	Cand_NamS	10	Candidate's Suffix

Form 497 Late Contributions Received/Made (Continued)

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R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	-----	-----
26 C		Office_Cd	3	Office Sought (See table of code in Overview)
27 C		Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
28 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
29 C		Juris_Dscr	40	Office Jurisdiction Descrip (Req. if Juris_Cd=[CIT CTY LOC OTH])
30 C		Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE])
31 O		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
32 O		Bal_Name	200	Ballot Measure Name
33 O		Bal_Num	7	Ballot Number or Letter
34 O		Bal_Juris	40	Jurisdiction
35 O		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
36 O		Memo_RefNo	20	Reference to text contained in a TEXT record.

Form 498 Late Independent Expenditures Made

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R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	----	-----
	01 Rx	Rec_Type	4	Record Type Value: S498
	02 Rx	Form_Type	6	Schedule Name/ID Value: F498-R = Late Payment Received From F498-A = Late Payment Attributed To  Note: Only one F498-R record is used per F498 filing.
	03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item
	04 R	Entity_Cd	3	Values: CAO - Candidate/Office-holder [COM RCP] - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
	05 C	Cmte_ID	9	Committee ID of Payee (if CAO or [COM RCP])
	06 R	Payor_NamL	200	Payor's Last name
	07 C	Payor_NamF	45	Payor's First name
	08 O	Payor_NamT	10	Payor's Prefix or Title
	09 O	Payor_NamS	10	Payor's Suffix
	10 R	Payor_Adr1	55	Address of Payor
	11 O	Payor_Adr2	55	Optional 2nd line of Address
	12 R	Payor_City	30	City
	13 R	Payor_ST	2	State code
	14 R	Payor_ZIP4	10	Zip+4
----- Fields #15 & #19 are used when Form_Type = 'F498-R' -----				
	15 O	Employer	200	Employer (only if Form_Type = 'F498-R')
	16 O	Occupation	60	Occupation (only if Form_Type = 'F498-R')
	17 O	SelfEmp_CB	1	Check Box: Self Employed?
	18 C	Date_Rcvd	8	Date Received (only if Form_Type = 'F498-R')
	19 C	Amt_Rcvd	12	Amount Received (only if Form_Type = 'F498-R')
----- Fields #20 & #34 are used when Form_Type = 'F498-A' -----				
	20 C	Cand_NamL	200	Candidate's Last name
	21 C	Cand_NamF	45	Candidate's First name

22	O	Cand_NamT	10	Candidate's Prefix or Title
23	O	Cand_NamS	10	Candidate's Suffix
24	C	Office_Cd	3	Office Sought (See table of code in Overview)
25	C	Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)
26	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
27	C	Juris_Dscr	40	Off. Juris. Dscrip (Req. if Juris_Cd=[CIT CTY LOC OTH])

Form 498 Late Independent Expenditures Made (continued)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
-----		-----	---	-----
28	C	Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE]
29	O	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
30	O	Bal_Name	200	Ballot Measure Name
31	O	Bal_Num	7	Ballot Number or Letter
32	O	Bal_Juris	40	Jurisdiction
33	C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F401)
34	C	Amt_Attrib	12	Amount Attributed (only if Form_Type = 'F498-A')
35	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
36	O	Memo_RefNo	20	Reference to text contained in a TEXT record.

\*\*\*\*\*  
S e c t i o n   2   -   C a m p a i g n   S t a t e m e n t s  
\*\*\*\*\*

400 Statement of Organization (Slate Mailer Organization)  
402 Statement of Termination (Slate Mailer Organization)  
410 Statement of Organization Recipient Committee

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Electronic File Components by Filing Type  
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RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F400	Cover Page; Stmt of Organization / Slate Mailer Org
CVR2	F400	Cover Page; Additional Names & Addresses
CVR3	F400	Cover Page; Part V; Verification Information
HDR	CAL	"CAL" Header record
CVR	F402	Cover Page; Stmt of Termination / Slate Mailer Org
CVR3	F402	Cover Page; Verification Information
HDR	CAL	"CAL" Header record
CVR	F410	Cover Page; Stmt of Organization / Recipient Committee
CVR2	F410	Cover Page; Additional Names & Addresses
CVR3	F410	Cover Page; Part 3; Verification Information



COVER PAGE RECORD LAYOUT FOR F400, F410 (STATEMENT OF ORGANIZATION)  
F402 (STMT OF TERMINATION - SLATE MAILER)

=====				
R{x}		Max		
# C{x}	Field Name	Len	Description	
-----				
01 Rx	Rec_Type	3	Record Type Value: CVR	
02 Rx	Form_Type	4	Type of Filing/Form set - Values: F400; F402; F410	
03 Rx	Filer_ID	9	Committee ID number of Filer	
04 R	Entity_Cd	3	Entity Code of the Filer Values: SMO - Slate Mailer Organization (F400,402) [COM RCP] - Recipient Committee (F410)	
05 Rx	Filer_NamL	200	Cand. Last name or Cmtte/Org Name	
06 O	Filer_NamF	45	Candidate's First name	
07 O	Filer_NamT	10	Candidate's Prefix or Title	
08 O	Filer_NamS	10	Candidate's Suffix	
09 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999	
10 Rx	Rpt_Date	8	Date this report is filed	
11 C	Qual_CB	1	Qualified Committee check-box (Req. if SMO)	
12 C	Qualfy_Dt	8	Date Qualified as committee (Req. if Qual_CB=X)	
13 C	Term_Date	8	Termination Effective Date (Req. if F402)	
14 R	Adr1	55	Street 1 of Filing Org/Cmtte/Candidate/Officeholder	
15 O	Adr2	55	Street 2 of Filing Org/Cmtte/Candidate/Officeholder	
16 R	City	30	City of Filing Org/Cmtte/Candidate/Officeholder	
17 R	ST	2	State of Filing Org/Cmtte/Candidate/Officeholder	
18 R	ZIP4	10	ZIP+4 of Filing Org/Cmtte/Candidate/Officeholder	
19 R	Phone	20	Phone of Filing Org/Cmtte/Candidate/Officeholder	
20 R	County_Res	20	County of Domicile, Residence, or where Located	
21 O	County_Act	20	County where Active (F410)	
22 O	Mail_Adr1	55	Mailing Address of Filing Committee - Street 1	
23 O	Mail_Adr2	55	Mailing Address of Filing Committee - Street 2	
24 C	Mail_City	30	Mailing Address of Filing Committee - City	
25 C	Mail_ST	2	Mailing Address of Filing Committee - State	

26	C	Mail_ZIP4	10	Mailing Address of Filing Committee - ZIP+4
27	O	Cmte_FAX	20	Optional Committee FAX number
28	O	Cmte_Email	60	Optional Committee Email address
29	R	Tres_NamL	200	Treasurer's Last name
30	R	Tres_NamF	45	Treasurer's First name
31	O	Tres_NamT	10	Treasurer's Prefix or Title
32	O	Tres_NamS	10	Treasurer's Suffix

COVER PAGE LAYOUT FOR STATEMENT OF ORGANIZATION/TERMINATION (Continued)

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R{x}		Max	
# C{x}	Field Name	Len	Description
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33 R	Tres_Adr1	55	Treasurer Street 1
34 O	Tres_Adr2	55	Treasurer Street 2
35 R	Tres_City	30	Treasurer City
36 R	Tres_ST	2	Treasurer State
37 R	Tres_ZIP4	10	Treasurer ZIP+4
38 R	Tres_Phon	20	Treasurer Phone
Note: F400 Name/Addr info for Principal Officer(s) (POF) are coded on CVR2 records with the CVR2.Item_Cd='POF'. Slate Mailer Auth Individuals (SMA) are coded on CVR2 records with Item_Cd='SMA'.			
Note: F410 Name/Addr info for Assistant Treasurer (ATR) and any other Principal Officer(s) (POF) are coded on CVR2 records with the CVR2.Item_Cd=['ATR' 'POF'].			

39 C	Actvty_Lvl	2	Main level of Activity (Req. if SMO or GenPurp_CB=X) Values: CI = City; CO = County; ST = State
------	------------	---	--

----- Fields 40 - 42 used on F400 Statement of Organization -----

40 C	Com82013YN	1	Is this SMO a 82013 "Committee"? (Yes/No) (F400)
41 C	Com82013Nm	200	Name of 82013 Committee (F400; when Com82013YN=Y)
42 O	Com82013ID	9	ID of 82013 Committee (if Com82013Nm is a RCP cmtte)

----- Fields 43 - 58 used on F410 Statement of Organization -----

43 O	Control_CB	1	Controlled Committee Check-box
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Note: Name/Address info supplied on CVR2 record(s) with Item\_Cd='CTL'.

44 O	Bank_Nam	200	Name of Financial Institution
45 C	Bank_Adr1	55	Street 1 of Financial Institution
46 O	Bank_Adr2	55	Street 2 of Financial Institution
47 C	Bank_City	30	City of Financial Institution
48 C	Bank_ST	2	State of Financial Institution
49 C	Bank_ZIP4	10	ZIP+4 of Financial Institution
50 C	Bank_Phon	20	Phone of Financial Institution
51 C	Bank_AcctNo	20	Bank Account Number
52 C	Acct_OpenDt	8	Date Account Opened
53 O	SurplusDsp	90	Disposition of Surplus Funds
54 O	PrimFC_CB	1	Primarily Formed Committee Check-box

Note: Name/Address info supplied on CVR2 record(s) with Item\_Cd='PFC'.

55 0 GenPurp\_CB 1 General Purpose Committee Check-box  
56 0 GPC\_Descr 300 Brief description of Activity of GPC

57 0 Sponsor\_CB 1 Sponsored Committee Check-box  
Note: Name/Address info supplied on CVR2 record(s) with Item\_Cd='SPO'.

58 0 BrdBase\_CB 1 Broad Based Committee Check-box

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

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R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: CVR2	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F400; F410	
03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item	

Note: Remainder of CVR2 record is parsed depending on value of Form\_Type.

----- Following variable fields used when Form\_Type=[F400|F410] -----

04 Rx	Entity_Cd	3	Values: ATR - Assistant Treasurer (F410) POF - Principal Officer (F400, F410) CAO - Candidate/Office-holder (F410) PRO - Proponent (F410) SPO - Sponsor (F410) BNM - Ballot Measure's Name/Title (F410) ATH - Authorizing Individual (F400) COM - Committee (F400) CTL - Controlled Committee (F410) RCP - Recipient Committee (F400)
05 Rx	Enty_NamL	200	Filing Entity's Last name
06 C	Enty_NamF	45	Filing Entity's First name
07 O	Enty_NamT	10	Filing Entity's Prefix or Title
08 O	Enty_NamS	10	Filing Entity's Suffix
09 Rx	Item_Cd	3	Section of Stmt of Org this Itemization relates to Values: ATR - Assistant Treasurer (F410) POF - Principal {Filing} Officer (F400, F410) CTL - Controlled Committee Itemization (F410) PFC - Primarily Formed Committee Item (F410) SPO - Sponsored Committee Itemization (F410) SMA - Slate Mailer Authorizer (F400)

10	C	Mail_Adr1	55	Address	(if Item_Cd = SPO)
11	O	Mail_Adr2	55	Optional 2nd line of Address	
12	C	Mail_City	30	City	(if Item_Cd = SPO)
13	C	Mail_ST	2	State code	(if Item_Cd = SPO)
14	C	Mail_ZIP4	10	Zip+4	(if Item_Cd = SPO)
15	O	Day_Phone	20	Daytime Phone Number	
16	O	FAX_Phone	20	FAX Phone Number	
17	O	Email_Adr	60	Email Address	{does not map to present FPPC forms}

COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Cont.)

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R{x}			Max	
# C{x}	Field Name	Len	Description	
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18 C	Cmte_ID	9	Committee ID (If Entity_Cd=RCP)	
19 C	Ind_Group	90	Industry Group / Affiliation (if Item_Cd = SPO)	
20 C	POF_Title	45	Position/Title of Prin Officer (if Item_Cd = POF)	
----- Fields #21 - #32 used when Item_Cd=[CTL PFC]				
----- Note: On F410; when Item_Cd='PFC': EITHER Candidate OR Ballot Measure				
----- information is "conditionally required", BUT not both at the same time.				
21 C	Office_Cd	3	Office Sought (See table of code in Overview)	
22 C	Offic_Dscr	40	Office Sought Description (Req. if Office_Cd=OTH)	
23 C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other	
24 C	Juris_Dscr	40	Off. Juris. Dscrip (Req. if Juris_Cd=[CIT CTY LOC OTH]	
25 C	Dist_No	3	Office District Number (Req. if Juris_Cd=[SEN ASM BOE]	
26 O	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought	
27 C	Non_Pty_CB	1	Non-Partisan check-box (only if Item_Cd = CTL)	
28 C	Party_Name	200	Name of Party (if partisan) (only if Item_Cd = CTL)	
29 C	Bal_Num	7	Ballot Number or Letter (only if Item_Cd = PFC)	
30 C	Bal_Juris	40	Ballot Measure Jurisdiction (only if Item_Cd = PFC)	
31 C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (only if Item_Cd = PFC)	
32 C	Year_Elect	4	Year of Election (format cyy) (only if Item_Cd = CTL)	

COVER PAGE (PART III; VERIFICATION INFO) RECORD LAYOUT

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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01	Rx	Rec_Type	4	Record Type Value: CVR3
02	Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F400; F402; F410
03	Rx	Tran_ID	20	Transaction ID - permanent value unique to this item

Note: Remainder of CVR3 record is parsed depending on value of Form\_Type.  
Refer to Section I description of the CVR3 record for the description  
of field parsing rules for Campaign Statements F400, F402, F410.



\*\*\*\*\*  
S e c t i o n   3   -   L o b b y i s t   D i s c l o s u r e   R e p o r t s  
\*\*\*\*\*

615      Lobbyist Report  
625      Report of Lobbying Firm  
630\*     Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)  
635      Report of Lobbyist Employer or Report of Lobbying Coalition  
635-C\*   Payments Received by Lobbying Coalitions  
640\*     Governmental Agencies Reporting (Attachment to Form 635 or Form 645)  
645      Report of Person Spending \$5,000 or More  
690\*     Amendment to Lobbying Disclosure Report

\* The 630, 635-C, 640, and 690 forms are not filed as standalone forms,  
but instead are included within the 615, 625, 635, and 645 filings.

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Electronic File Components by Filing Type  
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RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F615	Cover Page; Lobbyist Report
F690	F615	Amendment Information sheet (a.k.a. Form 690)
LEXP	F615P1	Part I - Activity Expenses
LCCM	F615P2	Part II - Campaign Contributions Made [or Delivered]
HDR	CAL	"CAL" Header record
CVR	F625	Cover Page; Recipient Committee
CVR2	F625	Cover Page; Part II; Partners, Owners, Officers, ...
F690	F625	Amendment Information sheet (a.k.a. Form 690)
SMRY	F625...	Summary Page & Misc. Schedule Line-item [sub]totals
LPAY	F625P2	Payments Received in Connection with Lobbying Activity
LEXP	F625P3A	Part III/Sec A - Activity Expenses
LOTH	F625P3B	Part III/Sec B - Payments to OTHER Lobbying Firms

LCCM	F625P4B	Part IV/Sec B - Campaign Contributions Made
LATT	S630	Attachment Form 630 - Payments Made to Lobbying Coalitions

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F635	Cover Page; Candidate Committee
CVR2	F635	Cover Page; Part II; Partners, Owners, Officers, ...
F690	F635	Amendment Information sheet (a.k.a. Form 690)
SMRY	F635...	Summary Page & Misc. Schedule Line-item [sub]totals
LPAY	F635P3B	Part III/Sec B - Payments to Lobbying Firms
LEXP	F635P3C	Part III/Sec C - Activity Expenses
LCCM	F635P4B	Part IV/SecB - Campaign Contributions Made
LATT	S630	Attach Form 630 - Payments Made to Lobbying Coalitions
LATT	S635-C	Attach Form 635-C - Payments Rcvd by Lobbying Coalitions
LATT	S640	Attach Form 640 - Other Payments to Influence ...
HDR	CAL	"CAL" Header record
CVR	F645	Cover Page; Recipient Committee
F690	F645	Amendment Information sheet (a.k.a. Form 690)
SMRY	F645...	Summary Page & Misc. Schedule Line-item [sub]totals
LEXP	F645P2A	Part II/Sec A - Activity Expenses
LCCM	F645P3B	Part III/SecB - Campaign Contributions Made
LATT	S630	Attach Form 630 - Payments Made to Lobbying Coalitions
LATT	S640	Attach Form 640 - Other Payments to Influence ...

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 LOBBYIST DISCLOSURE REPORTS

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R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	3	Record Type Value: CVR	
02 Rx	Form_Type	4	Type of Filing or Form set. Values: F615; F625; F635; F645	
03 Rx	Sender_ID	9	ID# of Lobbyist Entity that is SUBMITTING this report.  (Note: This is the ID# assigned by the SOS after the Lobbyist Entity first registers. Typically, it is the same as the Filer_ID except when a Firm is submitting a report on behalf of another Lobbyist Entity.)	
04 Rx	Filer_ID	9	ID# of Lobbyist Entity that is SUBJECT of this report.  (Note: In the case of F615 & F635 reports, the Sender and Filer ID# are not necessarily the same. However, they must always be equal on F625 and 645 reports.) (Note: The contents of this record (Name/Address/etc.) belong to the Lobbying Entity of the Filer_ID, NOT the Lobbying Entity of the Sender_ID.)	
05 R	Entity_Cd	3	Entity Code of the Filer Values: LBY - Lobbyist (a person) (F615, F645) FRM - Lobbying Firm (F625, F645) LEM - Lobbying Employer (F635, F645) LCO - Lobbying Coalition (F635, F645) IND - Person (spending > \$5000) (F645) OTH - Other (F645)	
06 Rx	Filer_NamL	200	Name of Lobbyist, Firm, Employer, Coalition or Major Donor that is filing report	
07 C	Filer_NamF	45	Lobbyist Entity First name	
08 O	Filer_NamT	10	Lobbyist Entity Prefix or Title	
09 O	Filer_NamS	10	Lobbyist Entity Suffix	
10 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999	
11 Rx	Rpt_Date	8	Date this report is filed	
12 R	From_Date	8	Reporting Period From Date	

13	R	Thru_Date	8	Reporting Period To/Through Date
14	C	Cum_Beg_Dt	8	Cumulative Period Beginning Date (Req on F625,635,645)
15	C	Firm_ID	9	ID# of Firm/Employer/Coalition (Req on F615)

(This is the ID# of the Firm/Employer/Coalition the  
Lobbyist works for - if Lobbyist not self-employed).

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)

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R{x}			Max	
# C{x}	Field Name	Len	Description	
-----	-----	---	-----	

16 C	Firm_Name	200	Name of Firm/Employer/Coalition (Req on F615)
			(This is the Name of the Firm/Employer/Coalition the Lobbyist works for - if Lobbyist not self-employed).
			(Firm_Name is mapped to print rendering of the 690 form only for amended F615 reports when Entity_Cd = 'LBY'.)
17 R	Firm_Adr1	55	Street 1 of Firm/Employer/Coalition or Business
18 O	Firm_Adr2	55	Street 2 of Firm/Employer/Coalition or Business
19 R	Firm_City	30	City of Firm/Employer/Coalition or Business
20 R	Firm_ST	2	State of Firm/Employer/Coalition or Business
21 R	Firm_ZIP4	10	ZIP+4 of Firm/Employer/Coalition or Business
22 R	Firm_Phon	20	Phone of Firm/Employer/Coalition or Business

----- Mailing Address fields only apply to F615 and F625 filings.

23 O	Mail_Adr1	55	Mail Address of Firm/Employer/Coalition - Street 1
24 O	Mail_Adr2	55	Mail Address of Firm/Employer/Coalition - Street 2
25 C	Mail_City	30	Mail Address of Firm/Employer/Coalition - City
26 C	Mail_ST	2	Mail Address of Firm/Employer/Coalition - State
27 C	Mail_ZIP4	10	Mail Address of Firm/Employer/Coalition - ZIP+4
28 O	Mail_Phon	20	Mail Address of Firm/Employer/Coalition - Phone
			(Note: This field does not appear on any forms, use for a second, alternate phone number is optional.)

----- Note: Fields 29-39 are also mapped to the print rendering of the F690

29 R	Sig_Date	8	Date when signed
30 R	Sig_Loc	45	City and State where signed
31 R	Sig_NamL	200	Signer "as signed" Last name
32 R	Sig_NamF	45	Signer "as signed" First name
33 O	Sig_NamT	10	Signer "as signed" Prefix or Title
34 O	Sig_NamS	10	Signer "as signed" Suffix

35	R	Prn_NamL	200	Signer "as typed/printed" Last name	(F625,F635,F645)
36	R	Prn_NamF	45	Signer "as typed/printed" First name	(F625,F635,F645)
37	O	Prn_NamT	10	Signer "as typed/printed" Prefix or Title	
38	O	Prn_NamS	10	Signer "as typed/printed" Suffix	
39	C	Sig_Title	45	Title of Signer	(F625,F635,F645)

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)

=====

R{x}			Max	
# C{x}	Field Name	Len	Description	

----- Variable F615 fields follow when Form\_Type=F615 -----

40 O	NoPart1_CB	1	"No Part I information" check-box
41 O	NoPart2_CB	1	"No Part II information" check-box

----- Variable F625 fields follow when Form\_Type=F625 -----

40 O	Part1_1_CB	1	"Partners, Owners, ... Form 615 attached" check-box
41 O	Part1_2_CB	1	"Partners, Owners, ... Listed below" check-box
42 O	Ctrib_N_CB	1	"No Campaign Contributions Made" check-box
43 O	Ctrib_Y_CB	1	"Part IV completed and Attached" check-box
44 O	Lobby_N_CB	1	"Lobby Coalition - None" check-box
45 O	Lobby_Y_CB	1	"Lobby Coalition - F630 attached" check-box

----- If applicable, give Major Donor Name or Recipient Committee & ID

46 C	Major_NamL	200	Major Donor Last Name (Part IV; Section A)
47 C	Major_NamF	45	Major Donor First Name(s)
48 O	Major_NamT	10	Major Donor Prefix or Title
49 O	Major_NamS	10	Major Donor Suffix
50 C	RcpCmte_Nm	200	Recipient Committee Name (Part IV; Section A)
51 C	RcpCmte_ID	9	Recipient Cmtte (or Major Donor) ID# (Part IV; Sec A)

----- Variable F635 fields follow when Form\_Type=F635 -----

40 O	Ctrib_N_CB	1	"No Campaign Contributions Made" check-box
41 O	Ctrib_Y_CB	1	"Part IV completed and Attached" check-box
42 R	Lby_Actvty	400	Description of Lobbying Activity -- Refer to Overview for instructions on coding this field.



----- If applicable, give Major Donor Name or Recipient Committee & ID

43 C Major\_NamL 200 Major Donor Last Name (Part IV; Section A)

44 C Major\_NamF 45 Major Donor First Name(s)

45 O Major\_NamT 10 Major Donor Prefix or Title

46 O Major\_NamS 10 Major Donor Suffix

47 C RcpCmte\_Nm 200 Recipient Committee Name (Part IV; Section A)

48 C RcpCmte\_ID 9 Recipient Cmtte (or Major Donor) ID# (Part IV; Sec A)

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description

----- Variable F645 fields follow when Form\_Type=F645 -----

40	O	Ctrib_N_CB	1	"No Campaign Contributions Made" check-box
41	O	Ctrib_Y_CB	1	"Part III completed and Attached" check-box
42	R	Lby_Actvty	400	Description of Lobbying Activity -- Refer to Overview for instructions on coding this field.

----- If applicable, give Major Donor Name or Recipient Committee & ID

43	C	Major_NamL	200	Major Donor Last Name (Part III; Section A)
44	C	Major_NamF	45	Major Donor First Name(s)
45	O	Major_NamT	10	Major Donor Prefix or Title
46	O	Major_NamS	10	Major Donor Suffix
47	C	RcpCmte_Nm	200	Recipient Committee Name (Part III; Section A)
48	C	RcpCmte_ID	9	Recipient Cmtte (or Major Donor) ID# (Part IV; Sec A)

Note: F625 Part I and F635 Part II Name & Title information for Partners, Owners, Officers and Employees (PTN,OWN,OFF,EMP) is coded on CVR2 records with CVR2.Entity\_Cd = [PTN|OWN|OFF|EMP].

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

=====

R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: CVR2	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F625; F635	
03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item	

Note: Remainder of CVR2 record is parsed depending on value of Form\_Type.

----- Following variable fields used when Form\_Type=[F625|F635] -----

R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
04 Rx	Entity_Cd	3	Values: PTN - Partner OWN - Owner OFF - Officer EMP - Employee	
05 C	Entity_ID	9	ID# of Entity (Partner, Owner, Officer, Employee) if that entity is required to file Form 615. (Note: Required on F625 when CVR.40.Part_1_1='X')	
06 R	Enty_NamL	200	Partner, Owner, Officer, Employee Last name	
07 R	Enty_NamF	45	Partner, Owner, Officer, Employee First name	
08 O	Enty_NamT	10	Partner, Owner, Officer, Employee Prefix or Title	
09 O	Enty_NamS	10	Partner, Owner, Officer, Employee Suffix	
10 C	Enty_Title	45	Title of Entity Named above (Req. on F635 only)	

AMENDMENT INFORMATION (a.k.a.. Form 690; Part II)

=====

R{x}			Max	
# C{x}	Field Name	Len	Description	
----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: F690	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F615; F625; F635; F645	
03 Rx	Exec_Date	8	Date the original report (or prior amendment to the original report) was executed on	
04 Rx	From_Date	8	Report Period From Date of Original Report	
05 Rx	Thru_Date	8	Report Period To/Through Date of Original Report	
06 O	Chg_Parts	100	Amended info affects items on Part(s)	
07 O	Chg_Sects	100	Amended info affects items on Section(s)	
08 Rx	Amend_Txt1	330	Description of changes (6 lines of 55 char 9pt text)	

SUMMARY TOTALS RECORD LAYOUT

=====

R{x}			Max	
# C{x}	Field Name	Len	Description	
-----	-----	---	-----	
01 Rx	Rec_Type	4	Record Type Value: SMRY	
02 Rx	Form_Type	8	Name of Filing Form or Schedule Name	
03 Rx	Line_Item	8	Line Number of Summary Total	
04 o	Amount_A	12	Summary Amount (Amount this Period)	

Note: Amount(s) may have a null or zero value if there is no dollar total to be conveyed. SMRY records with null/zero Amount(s) do not have to be coded within a filing. Amount(s) are assumed to be zero in the absence of a SMRY record.

Examples:

=====

F615 Lobbyist Report does not have any summary (SMRY) totals.

F625 SMRY records (when needed) are coded with these Form\_Type/Line# values:

SMRY line

=====

SMRY,F625,A,Amt\_A

SMRY,F625,B,Amt\_A

SMRY,F625,C,Amt\_A

SMRY,F625,D,Amt\_A

SMRY,F625P2,0,Amt\_A {no Part 2 line-item# on form, code Line\_Item=0 (zero)}

SMRY,F625P3A,1,Amt\_A

SMRY,F625P3A,2,Amt\_A

SMRY,F625P3A,3,Amt\_A

SMRY,F625P3B,0,Amt\_A {no Part 3b line-item# on form, code Line\_Item=0 (zero)}



F635(including F640) SMRY records are coded with these Form\_Type/Line# values:

SMRY line

=====

SMRY,F635,A,Amt\_A

SMRY,F635,B,Amt\_A

SMRY,F635,C,Amt\_A

SMRY,F635,D,Amt\_A

SMRY,F635,ABCD,Amt\_A

SMRY,F635,E,Amt\_A

SMRY,F635P3A,1,Amt\_A

SMRY,F635P3A,2,Amt\_A

SMRY,F635P3B,0,Amt\_A {no Part 3b line-item# on form, code Line\_Item=0 (zero)}

SMRY,F635P3C,0,Amt\_A {no Part 3c line-item# on form, code Line\_Item=0 (zero)}

SMRY,F635P3D,1,Amt\_A

SMRY,F635P3D,2,Amt\_A

SMRY,F635P3D,3,Amt\_A

SMRY,F635P3E,0,Amt\_A {no Part 3e line-item# on form, code Line\_Item=0 (zero)}

SMRY,S640,1,Amt\_A

SMRY,S640,2,Amt\_A

SMRY,S640,3,Amt\_A

SMRY,S640,4,Amt\_A

SMRY,S640,5,Amt\_A

F645(including F640) SMRY records are coded with these Form\_Type/Line# values:

SMRY line

=====

SMRY,F645,A,Amt\_A

SMRY,F645,B,Amt\_A

SMRY,F645,AB,Amt\_A

SMRY,F645,C,Amt\_A

SMRY,F645P2A,0,Amt\_A {no Part 2a line-item# on form, code Line\_Item=0 (zero)}

SMRY,F645P2B,1,Amt\_A

SMRY,F645P2B,2,Amt\_A

SMRY,F645P2B,3,Amt\_A

SMRY,F645P2C,0,Amt\_A {no Part 2c line-item# on form, code Line\_Item=0 (zero)}

SMRY,S640,1,Amt\_A  
SMRY,S640,2,Amt\_A  
SMRY,S640,3,Amt\_A  
SMRY,S640,4,Amt\_A  
SMRY,S640,5,Amt\_A



ACTIVITY EXPENDITURE SCHEDULES: (F615P1; F625P3A; F635P3C; F645P2A)

=====

R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	----	-----
01 Rx		Rec_Type	4	Record Type Value: LEXP
02 Rx		Form_Type	7	Schedule Name/ID Values: F615P1 = F615/Part 1 - Activity Expenses F625P3A = F625/Part 3A - Activity Expenses F635P3C = F635/Part 3C - Activity Expenses F645P2A = F645/Part 2A - Activity Expenses
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		RecSubType	1	1 = Main Item Entry (Date and Amount are required) 2 = Subsequent detail of additional Beneficiary info
05 R		Entity_Cd	3	Entity Code of the Payee Values: IND - Individual; OTH - Other (e.g. a Business, Org, ...)
06 R		Payee_NamL	200	Payee's Last name
07 C		Payee_NamF	45	Payee's First name (Req if 'IND')
08 O		Payee_NamT	10	Payee's Prefix or Title
09 O		Payee_NamS	10	Payee's Suffix
10 R		Payee_Adr1	55	Address of Payee
11 O		Payee_Adr2	55	Optional 2nd line of Address
12 R		Payee_City	30	City
13 R		Payee_ST	2	State code
14 R		Payee_ZIP4	10	Zip+4
15 O		CredCardCo	200	Name of Credit Card Company (if paid by Credit Card)
16 R		Bene_Name	90	Name of Reportable Person Benefiting
17 R		Bene_Posit	90	Official Position of Person Benefiting
18 R		Bene_Amt	12	Amount Benefiting Beneficiary
19 R		Expn_Dscr	90	Description of Consideration
20 C		Date	8	Date of Expenditure (Only when RecSubType=1)
21 C		Amount	12	Amount of Payment (Only when RecSubType=1)
22 O		Memo_Code	1	Memo Amount? (Date/Amount are informational only)

23	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
24	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record

PAYMENTS MADE/RECEIVED TO/FROM LOBBYING FIRMS SCHEDULES: (F625P2; F635P3B)

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R{x}	# C{x}	Field Name	Max Len	Description
----	-----	----	----	-----
01 Rx		Rec_Type	4	Record Type Value: LPAY
02 Rx		Form_Type	7	Schedule Name/ID Value: F625P2 = F625/Part 2 - Paymts Rcvd for Lobby Activity F635P3B = F635/Part 3B - Payments to Lobbying Firms
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		Entity_Cd	3	Entity Code of the Employer Values: FRM - Lobbying Firm LEM - Lobbying Employer LCO - Lobbying Coalition
05 R		Emplr_NamL	200	Name of Firm, Employer, Coalition
06 O		Emplr_NamF	45	Employer First name (never a person / not used)
07 O		Emplr_NamT	10	Employer Prefix or Title (never a person / not used)
08 O		Emplr_NamS	10	Employer Suffix (never a person / not used)
09 R		Emplr_Adr1	55	Address of Firm, Employer, Coalition
10 O		Emplr_Adr2	55	Optional 2nd line of Address
11 R		Emplr_City	30	City
12 R		Emplr_ST	2	State code
13 R		Emplr_ZIP4	10	Zip+4
14 C		Emplr_Phon	20	Phone Number (Req if F625/Part2 (if Form_Type=F625P2))
15 C		Lby_Actvty	200	Description of Lobbying Activity (Req only on F625P2) See Overview for instructions on coding this field.

----- Any one out of the following 3 Amounts are required -----

16 C	Fees_Amt	12	Fees and Retainers Amount
17 C	Reimb_Amt	12	Reimbursements of Expenses Amount
18 C	Advan_Amt	12	Advance & Other Payments Amount
19 C	Advan_Dscr	100	Description of Advance and Other Payments (Required if Advan_Amt is non-zero)

20	R	Per_Total	12	Total this {reporting} Period
21	R	Cum_Total	12	Cumulative Total to Date
22	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
23	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
24	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record

PAYMENT TO OTHER LOBBYING FIRMS: (F625P3B)

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R{x}		Field Name	Max Len	Description
# C{x}				
----		-----	---	-----
01 Rx		Rec_Type	4	Record Type Value: LOTH
02 Rx		Form_Type	7	Schedule Name/ID Values: F625P3B = F625/Part 3B - Paymts to OTHER Lobby Firms
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 R		Firm_Name	200	Name of Firm
05 R		Firm_Adr1	55	Address of Firm
06 O		Firm_Adr2	55	Optional 2nd line of Address
07 R		Firm_City	30	City
08 R		Firm_ST	2	State code
09 R		Firm_ZIP4	10	Zip+4
10 R		Firm_Phon	20	Phone Number
11 R		Subj_NamL	200	Last Name of Employer/Client subject of lobbying
12 O		Subj_NamF	45	First Name of Employer/Client subject of lobbying
13 O		Subj_NamT	10	Prefix/Title of Employer/Client subject of lobbying
14 O		Subj_NamS	10	Suffix of Employer/Client subject of lobbying
15 O		Date	8	Date of Payment (Does not show on form)
16 R		Amount	12	Amount of Payment
17 R		Cum_Amt	12	Cumulative Total to Date
18 O		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
19 O		Memo_RefNo	20	Reference to text contained in a TEXT record.

CAMPAIGN CONTRIBUTIONS SCHEDULES: (F615P2; F625P4B; F635P4B; F645P3B)

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R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	-----	-----
	01 Rx	Rec_Type	4	Record Type Value: LCCM
	02 Rx	Form_Type	7	Schedule Name/ID Values: F615P2 = F615/Part 2 - Campaign Contrib F625P4B = F625/Part 4B - Campaign Contrib F635P4B = F635/Part 4B - Campaign Contrib F645P3B = F645/Part 3B - Campaign Contrib
	03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item
	04 R	Entity_Cd	3	Entity Code for Recipient of the Campaign Contribution Value: COM - (Recipient) Committee
	05 R	Recip_NamL	200	Name of Recipient of Campaign Contribution
	06 O	Recip_NamF	45	Recipient's First name
	07 O	Recip_NamT	10	Recipient's Prefix or Title
	08 O	Recip_NamS	10	Recipient's Suffix
	----- These Address fields do not appear on any forms, they are optional			
	09 O	Recip_Adr1	55	Address of Recipient
	10 O	Recip_Adr2	55	Optional 2nd line of Address
	11 O	Recip_City	30	City
	12 O	Recip_ST	2	State code
	13 O	Recip_ZIP4	10	Zip+4
	14 R	Recip_ID	9	ID# of Recipient
	----- Contributor Name and Separate Account only apply to F615 filings			
	15 C	Ctrib_NamL	200	Contributor's Last name (If other than Lobbyist)
	16 O	Ctrib_NamF	45	Contributor's First name
	17 O	Ctrib_NamT	10	Contributor's Prefix or Title
	18 O	Ctrib_NamS	10	Contributor's Suffix
	19 C	Acct_Name	90	Name of Separate Account (If applicable)
	20 C	Date	8	Date of Contribution
	21 C	Amount	12	Amount of Contribution

22	O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
23	O	Memo_RefNo	20	Reference to text contained in a TEXT record.
24	O	BakRef_TID	20	Back Reference to a Tran_ID of a "parent" record

ATTACHMENT SCHEDULES FOR PAYMENTS: (S630; S635-C; S640)

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R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	----	-----
	01 Rx	Rec_Type	4	Record Type Value: LATT
	02 Rx	Form_Type	6	Schedule Name/ID Values: S630 = Payments Made to Lobbying Coalitions S635-C = Payments Rcvd by Lobbying Coalitions S640 = Other Payments to Influence ...
	03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item
	04 R	Entity_Cd	3	Entity Code of the Payment Recipient/Payee Values: FRM - Lobbying Firm; (S635-C S640) LEM - Lobbying Employer; (S635-C S640) LCO - Lobbying Coalition; (S630 S635-C) LBY - Lobbyist (a person); (S635-C) IND - Individual; (S635-C S640) OTH - Other (Bus,Org,etc.) (S635-C S640)
	05 R	Recip_NamL	200	Recipient/Payee's Last name
	06 C	Recip_NamF	45	Recipient/Payee's First name (Req if 'LBY' or 'IND')
	07 O	Recip_NamT	10	Recipient/Payee's Prefix or Title
	08 O	Recip_NamS	10	Recipient/Payee's Suffix
	09 R	Recip_Adr1	55	Address of Recipient/Payee
	10 O	Recip_Adr2	55	Optional 2nd line of Address
	11 R	Recip_City	30	City
	12 R	Recip_ST	2	State code
	13 R	Recip_ZIP4	10	Zip+4
	14 O	Date	8	Date of Payment (Does not show on form)
	15 R	Amount	12	Amount of Payment
	16 R	Cum_Amt	12	Cumulative Total to Date
	17 O	CumBeg_Dt	8	Cumulative Period Begin Date (This field is not used)
	18 O	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	19 O	Memo_RefNo	20	Reference to text contained in a TEXT record.



\*\*\*\*\*  
S e c t i o n   4   -   L o b b y i s t   S t a t e m e n t s  
\*\*\*\*\*

601   Lobbying Firm Registration Statement  
602   Lobbying Firm Activity Authorization  
603   Lobbyist Employer or Lobbying Coalition Registration Statement  
604   Lobbyist Certification Statement  
605\*   Amendment to Registration, Lobbying Firm, Lobbyist Employer,  
          Lobbying Coalition  
606   Notice of Termination  
607   Notice of Withdrawal

\* The 605 is not filed as a stand-alone filing.   Instead  
   it is included within the 601 and 603 Registration filings.

\*\*\*\*\*

Electronic File Components by Filing Type  
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RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F601	Cover Page; Lobbying Firm Registration Statement
CVR2	F601	Cover Page; Part I Individual Lobbyists
F605	F601	Amendment Information sheet (a.k.a. Form 605)
LEMP	F601P2A	Part II/Sec A - Lobbyist Employers
LEMP	F601P2B	Part II/Sec B - Subcontracted Clients
HDR	CAL	"CAL" Header record
CVR	F602	Cover Page; Lobbying Firm Activity Authorization
CVR2	F602	Cover Page; side 1: Names of Subcontracted Clients side 2: Names "50 or less" Assoc members

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F603	Cover Page; Lobbyist Employer/Coalition Regis Stmt
CVR2	F603	Cover Page; Names of Employees, Firms & Agencies
F605	F603	Amendment Information sheet (a.k.a. Form 605)
HDR	CAL	"CAL" Header record
CVR	F604	Cover Page; Lobbyist Certification Statement
HDR	CAL	"CAL" Header record
CVR	F606	Cover Page; Notice of Termination
HDR	CAL	"CAL" Header record
CVR	F607	Cover Page; Notice of Withdrawal

COVER PAGE RECORD LAYOUT FOR: F601; F602; F603; F604; F606; F607

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R{x}			Max	
# C{x}	Field Name	Len	Description	
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01 Rx	Rec_Type	4	Record Type Value: CVR	
02 Rx	Form_Type	4	Type of Filing or Form set. Values: F601; F602; F603; F604; F606; F607	
03 Rx	Sender_ID	9	ID# of Lobbyist Entity that is SUBMITTING this report.  (Note: This is the ID# assigned by the SOS after the Lobbyist Entity first registers. Typically, it is the same as the Filer_ID except when a Firm is submitting a report on behalf of another Lobbyist Entity.)	
04 Rx	Filer_ID	9	ID# of Lobbyist Entity that is SUBJECT of this report.  (Note: Sender and Filer ID# are not necessarily the same on F602, F604, F606 & F607 filings. However, they must always be equal on F601 and 603 reports.)  (Note: The contents of this record (Name/Address/etc.) belong to the Lobbying Entity of the Filer_ID, NOT the Lobbying Entity of the Sender_ID.)	
05 R	Entity_Cd	3	Entity Code of the Filer Values: LBY - Lobbyist Person (F601,604,606,607) FRM - Lobbying Firm (F601,602,603,606) LEM - Lobbying Employer (F601,602,603,606) LCO - Lobbying Coalition (F601,602,603,606)	
06 Rx	Filer_NamL	200	Lobbying Entity Name (or Lobbyist Person's Last Name)	
07 C	Filer_NamF	45	Lobbyist's First name (Req only if 'LBY')	
08 O	Filer_NamT	10	Lobbyist's Prefix or Title	
09 O	Filer_NamS	10	Lobbyist's Suffix	
10 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999	
11 Rx	Rpt_Date	8	Date this report is filed	
12 R	LS_Beg_Yr	4	Legislative Session Beginning Year	

13	R	LS_End_Yr	4	Legislative Session Ending Year
14	O	Qual_Date	8	Date Qualified (when this is an initial registration) (this date applies to F601, F603 and F604 forms)
15	C	Eff_Date	8	Effective Date of Auth/Term (Req. if F602,F606,F607)

COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)

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R{x}		Field Name	Max Len	Description
# C{x}				
16 R		Bus_Adr1	55	Business Address of Filer - Street 1
17 O		Bus_Adr2	55	Business Address of Filer - Street 2
18 R		Bus_City	30	Business Address of Filer - City
19 R		Bus_ST	2	Business Address of Filer - State
20 R		Bus_ZIP4	10	Business Address of Filer - ZIP+4
21 R		Bus_Phon	20	Phone number
22 O		Bus_FAX	20	Optional FAX number
23 O		Bus_Email	60	Optional Email address
24 O		Mail_Adr1	55	Mail Address of Filer (if different) - Street 1
25 O		Mail_Adr2	55	Mail Address of Filer (if different) - Street 2
26 C		Mail_City	30	Mail Address of Filer (if different) - City
27 C		Mail_ST	2	Mail Address of Filer (if different) - State
28 C		Mail_ZIP4	10	Mail Address of Filer (if different) - ZIP+4
29 O		Mail_Phon	20	Mail Address of Filer (if different) - Phone
30 R		Sig_Date	8	Date when signed
31 O		Sig_Loc	45	City and State where signed (does not appear on forms)
32 R		Sig_NamL	200	Signer "as signed" Last name
33 R		Sig_NamF	45	Signer "as signed" First name
34 O		Sig_NamT	10	Signer "as signed" Prefix or Title
35 O		Sig_NamS	10	Signer "as signed" Suffix
36 C		Prn_NamL	200	Signer "as typed/printed" Last name (not on F604)
37 C		Prn_NamF	45	Signer "as typed/printed" First name (not on F604)
38 O		Prn_NamT	10	Signer "as typed/printed" Prefix or Title
39 O		Prn_NamS	10	Signer "as typed/printed" Suffix
40 C		Sig_Title	45	Title of Signer (not on F604)

----- Variable F601 field follows when Form\_Type=F601 -----

41 R		Stmt_Firm	90	Lobby Firm Name in "Statement of Responsible Officer"
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COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)

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R{x}		Max	
# C{x}	Field Name	Len	Description

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----- Variable F602/F603 fields follow when Form\_Type=[F602|F603] -----

----- One and only one of the following 4 check-boxes should be checked -----

41 C	Ind_CB	1	Individual check-box
42 C	Bus_CB	1	Business check-box
43 C	Trade_CB	1	Industry/Trade/Professional check-box
44 C	Oth_CB	1	Other check-box
45 C	A_B_Name	200	Name A. Individual or B. Business Entity
46 C	A_B_Adr1	55	Street 1 of A. Individual or B. Business Entity
47 O	A_B_Adr2	55	Street 2 of A. Individual or B. Business Entity
48 C	A_B_City	30	City of A. Individual or B. Business Entity
49 C	A_B_ST	2	State of A. Individual or B. Business Entity
50 C	A_B_ZIP4	10	ZIP+4 of A. Individual or B. Business Entity
51 C	Descrip_1	300	Description of Business Activity, Industry or Other
52 C	Descrip_2	300	Description of specific or other lobbying interests
53 C	C_Less50	1	No. members in Industry Assoc - 50 or less
54 C	C_More50	1	No. members in Industry Assoc - More than 50
55 O	Ind_Class	3	Industry Classification Values: AGR - Agriculture EDU - Education GOV - Government HEA - Health LAB - Labor Unions LEG - Legal PUB - Public Employee POL - Political Organizations UTL - Utilities OTH - Other
56 C	Ind_Descr	100	Description of Industry Classification if [OTH]er
57 C	Bus_Class	3	Business Classification (Req if Ind_Class is blank) Values: ENT - Entertainment FIN - Finance/Insurance LOG - Lodging/Restaurants

MAN - Manufacturing/Industrial  
MER - Merchandise/Retail  
OIL - Oil & Gas  
PRO - Professional/Trade  
REA - Real Estate  
TRN - Transportation  
OTH - Other

58 C    Bus\_Descr    100    Description of Business Classification if [OTH]er

COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)

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R{x}		Max	
# C{x}	Field Name	Len	Description

----- Additional variable F602 fields follow when Form\_Type=F602 -----

59 R	Auth_Name	200	Name authorized of Lobbying Firm
60 R	Auth_Adr1	55	Street 1 of Filer
61 O	Auth_Adr2	55	Street 2 of Filer
62 R	Auth_City	30	City 1 of Filer
63 R	Auth_ST	2	State of Filer
64 R	Auth_ZIP4	10	ZIP+4 of Filer

----- Additional Variable F603 fields follow when Form\_Type=F603 -----

59 R	Lobby_Int	300	Description of Part III Lobbying Interests
60 R	Influen_YN	1	Attempt to Influence State Legislation? Yes/No

----- Variable F604 fields follow when Form\_Type=F604 -----

41 R	Firm_Name	200	Name of Lobbyist Employer or Lobbying Firm
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----- Only ONE of the next three fields (check-boxes/Date) should be coded ---

42 C	NewCert_CB	1	Will take a New Cert check-box "check-circle" #1
43 C	RenCert_CB	1	Will take a Renewal Cert check-box "check-circle" #2
44 C	CompleDt	8	Ethics Orient Course Completion (Req if NewCert_CB and RenCert_CB are both blank)

----- Only ONE of the following 2 check-boxes should be checked -----

45 C	Lby_Reg_CB	1	Lobby agcy in 601/603 Reg Stmt check-box #1
46 C	Lby_604_CB	1	Lobby agcy in this 604 Stmt check-box #2
47 C	St_Leg_YN	1	Will Lobby State Legislature? Y/N (Req if Lby_604_CB=X)
48 C	St_Agency	100	List of Identified State Agencies (Req if Lby_604_CB=X)



----- Variable F606/F607 fields follow when Form\_Type=[F606|F607] -----

41 R Firm\_Name 200 Name of Lobbyist Employer or Lobbying Firm

42 C Lobby\_CB 1 "Lobbyist within the meaning ..." check-box (F607 only)

43 C L\_Firm\_CB 1 "Lobbying firm within the ..." check-box (F607 only)

----- At least one of above two check-boxes must be used on F607 filings -----

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

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R{x}			Max	
# C{x}	Field Name	Len	Description	
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01 Rx	Rec_Type	4	Record Type Value: CVR2	
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F601; F602; F603	
03 Rx	Tran_ID	20	Transaction ID - permanent value unique to this item	

Note: Remainder of CVR2 record is parsed depending on value of Form\_Type.

----- Following variable fields used when Form\_Type=[F601|F602] -----

R{x}			Max	
# C{x}	Field Name	Len	Description	
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04 Cx	Entity_Cd	3	Values: SCL - Subcontracted Client (F602, Cover/side1) MBR - Association member (F602, Cover/side2) Null - Entity_Cd not required on Form 601	
05 C	Entity_ID	9	ID# of Entity (Partner, Owner, Officer, Employee) on a F601 Part 1 (This person must also file a 604).	
			Note: Entity_ID is required for F601 filings; (i.e. when Entity_Cd not = 'SCL' or 'MBR')	
06 R	Enty_NamL	200	Lobbyist/Subcontracted Client/Assoc Member Last name	
07 C	Enty_NamF	45	Lobbyist/Assoc Member First name (Req if NOT 'SCL')	
08 O	Enty_NamT	10	Lobbyist/Assoc Member Prefix/Title	
09 O	Enty_NamS	10	Lobbyist/Assoc Member Suffix	

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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----- Following variable fields used when Form\_Type=F603 -----

	R{x}		Max	
#	C{x}	Field Name	Len	Description
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04	Rx	Entity_Cd	3	Values: FRM - Lobbying Firm (Right Col of Part I) EMP - Employee Lobbyist (Left side of Part I) AGY - State Agency (Listed in Part II)
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05	C	Entity_ID	9	ID# of Entity (Lobbying Firm or Employee Lobbyist) on a F603 (Employee Lobbyist must also file a 604).
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Note: Entity\_ID is required for F603 filings;  
(i.e. when Entity\_Cd = 'FRM' or 'EMP')

06	R	Enty_NamL	200	Lobbying Entity or State Agency Last name
07	C	Enty_NamF	45	Lobbying Entity First name (Req only if 'EMP')
08	O	Enty_NamT	10	Lobbying Entity Prefix or Title
09	O	Enty_NamS	10	Lobbying Entity Suffix

AMENDMENT INFORMATION (a.k.a.. Form 605; Part I)

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: F605
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F601; F603
03 Rx		Exec_Date	8	Date this Amendment executed on
04 Rx		From_Date	8	Report Period From Date of Original Report
05 Rx		Thru_Date	8	Report Period To/Through Date of Original Report
----- At least one of the Check-boxes below must be "checked"				
06 O		Add_L_CB	1	Add Lobbyist check-box
07 C		Add_L_Eff	8	Add Lobbyist Effective Date
08 C		A_L_NamL	200	Add Lobbyist Last Name (1st one changed)
09 C		A_L_NamF	45	Add Lobbyist First Name (1st one changed)
10 O		A_L_NamT	10	Add Lobbyist Prefix/Title (1st one changed)
11 O		A_L_NamS	10	Add Lobbyist Suffix (1st one changed)
12 O		Del_L_CB	1	Delete Lobbyist check-box
13 C		Del_L_Eff	8	Delete Lobbyist Effective Date
14 C		D_L_NamL	200	Delete Lobbyist Last Name (1st one changed)
15 C		D_L_NamF	45	Delete Lobbyist First Name (1st one changed)
16 O		D_L_NamT	10	Delete Lobbyist Prefix/Title (1st one changed)
17 O		D_L_NamS	10	Delete Lobbyist Suffix (1st one changed)
18 O		Add_LE_CB	1	Add Lobbyist Employer check-box
19 C		Add_LE_Eff	8	Add Lobbyist Employer Effective Date
20 C		A_LE_NamL	200	Add Lobbyist Employer Last Name (1st one changed)
21 O		A_LE_NamF	45	Add Lobbyist Employer First Name (1st one changed)
22 O		A_LE_NamT	10	Add Lobbyist Employer Prefix/Title (1st one changed)
23 O		A_LE_NamS	10	Add Lobbyist Employer Suffix (1st one changed)
24 O		Del_LE_CB	1	Delete Lobbyist Employer check-box
25 C		Del_LE_Eff	8	Delete Lobbyist Employer Effective Date
26 C		D_LE_NamL	200	Delete Lobbyist Employer Last Name (1st one changed)
27 O		D_LE_NamF	45	Delete Lobbyist Employer First Name (1st one changed)
28 O		D_LE_NamT	10	Delete Lobbyist Employer Prefix/Title (1st one changed)
29 O		D_LE_NamS	10	Delete Lobbyist Employer Suffix (1st one changed)
30 O		Add_LF_CB	1	Add Lobbying Firm check-box
31 C		Add_LF_Eff	8	Add Lobbying Firm Effective Date
32 C		A_LF_Name	200	Add Lobbying Firm Name (first one changed)
33 O		Del_LF_CB	1	Delete Lobbying Firm check-box

34	C	Del_LF_Eff	8	Delete Lobbying Firm Effective Date
35	C	D_LF_Name	200	Delete Lobbying Firm Name (first one changed)
36	O	Other_CB	1	Other Amendments check-box
37	C	Other_Eff	8	Other Amendments Effective Date
38	C	Other_Desc	100	Description of changes.
39	O	F606_Yes	1	Lobbyist ceasing all activities (Form 606)
40	O	F606_No	1	Lobbyist ceasing employment, but remains active

LOBBYIST EMPLOYERS/SUBCONTRACTED CLIENTS: (F601P2A; F601P2B)

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R{x}	# C{x}	Field Name	Max Len	Description
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01 Rx		Rec_Type	4	Record Type Value: LEMP
02 Rx		Form_Type	7	Schedule Name/ID Values: F601P2A = F601/Part 2A - Client / Employer F601P2B = F601/Part 2B - Subcontract Client
03 Rx		Tran_ID	20	Transaction ID - permanent value unique to this item
04 O		Client_ID	9	ID# of Part 2A Employer or Part 2B Client/Employer (This entity must also file a 602).
05 R		Cli_NamL	200	Last Name of [Employing] Client
06 O		Cli_NamF	45	First Name of [Employing] Client
07 O		Cli_NamT	10	Prefix or Title of [Employing] Client
08 O		Cli_NamS	10	Suffix of [Employing] Client
09 R		Cli_Adr1	55	Address of [Employing] Client
10 O		Cli_Adr2	55	Optional 2nd line of Address
11 R		Cli_City	30	City
12 R		Cli_ST	2	State code
13 R		Cli_ZIP4	10	Zip+4
14 R		Cli_Phon	20	Phone number
15 R		Eff_Date	8	Effective Date of Lobbying Contract
16 R		Con_Period	30	Period of Contract
17 R		AgencyList	200	Agencies to be Lobbied
18 R		Descrip	100	Description of Employer/Client Lobbying Interests

----- Following fields required for Form\_Type=F601P2B -----

19 O		SubFirm_ID	9	ID# of Part 2b Subcontracting Lobbying Firm (This entity must also file a 602).
20 C		Sub_Name	200	Name of Subcontracting Lobbying Firm
21 C		Sub_Adr1	55	Address of Subcontracting Lobbying Firm
22 O		Sub_Adr2	55	Optional 2nd line of Address
23 C		Sub_City	30	City
24 C		Sub_ST	2	State code

25	C	Sub_ZIP4	10	Zip+4
26	C	Sub_Phon	20	Phone number